SUPPLEMENT
TO THE
BRITISH MEDICAL JOURNAL.

LONDON: SATURDAY, JUNE 8TH, 1912.

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ASSOCIATION INTELLIGENCE, ETC.

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SPECIAL NOTICE TO MEMBERS.

Every member is requested to preserve this "Supplement," which contains matters specially referred to Divisions, until the subjects have been discussed by the Division to which he belongs. BY ORDER.

MATTERS REFERRED TO DIVISIONS.

British Medical Association.

STATE SICKNESS INSURANCE COMMITTEE.

NOTE.—These Schemes are not in final form. They are issued for the consideration of the Divisions, and the State Sickness Insurance Committee will consider any expressions of opinion forwarded by Divisions not later than June 25th, 1912, preparatory to presenting a Report on the subject to the Annual Representative Meeting.

A.

PUBLIC MEDICAL SERVICE SCHEME
(BASED UPON A CAPITATION SYSTEM OF PAYMENT)
FOR THE PROVISION OF MEDICAL ATTENDANCE
FOR
(I) PERSONS INSURED UNDER THE NATIONAL INSURANCE ACT, AND
(II) PERSONS NOT SO INSURED.

(I.) PERSONS INSURED UNDER THE NATIONAL INSURANCE ACT.

Object and Constitution.

1. *Object.*—The Public Medical Service of . . . . . (hereinafter called the Service) is an Association of Medical Practitioners, constituted to organise the provision of medical attendance and medicine for persons unable to pay the ordinary medical charges.

2. *Area.*—The area of the Service is* . . . . . .

3. *Members.*—Any duly registered medical practitioner practising within the area may become a member of the Service upon signing an undertaking to conform to these rules. Members may be either Acting or Honorary. An "Acting" member is one who undertakes medical attendance on the subscribers to the Service upon the terms laid down in these rules. An "Honorary" member is a member who has signed the undertaking to abide by these rules, but who does not undertake ordinary medical attendance in connection with the Service.

4. *Officers and Committee.*—The officers of the Service shall be a Chairman, Honorary Treasurer, and an Honorary Secretary, all of whom must be members of the Service. The Committee shall consist of the above officers, together with..... members, of whom.....members shall be elected by the local Division or Branch of the British Medical Association.

* As far as possible the area of a Public Medical Service should correspond with one or more of the areas defined under the provisions of the National Insurance Act, but in this case no set rule would meet all cases. Divisions must therefore draft a rule to suit their local conditions. In the case of a large area, such as a County, Sub-Divisions might be formed each with its own Committee, income limit, officers and officials.

Meetings and Government.

5. *Annual General Meeting.*—An ordinary general meeting of the members, called "The Annual Meeting" shall be held before March 1st of each year.* At this meeting the officers and members of the Committee shall be elected, with the exception of those to be elected by the local Division or Branch of the British Medical Association, and the Annual Report of the Committee, and Statement of Accounts of the Service for the preceding year shall be presented.

6. *Special Meeting.*—A special general meeting of the members may be convened at any time by the Committee, and shall be convened by the Secretary at the earliest practicable day and in any event within twenty-one days of receiving the requisition of.....members.

7. *Quorum.*—At a general meeting (ordinary or special).....members shall be a quorum.

8. *Notice.*—Subject to the provision hereinafter contained for fourteen days' notice in the case of a proposed alteration of Rules, at least seven days' notice of every general meeting and of the business thereof shall be given by the Secretary to all members, but the accidental omission to give notice to any member shall not invalidate the proceedings of a meeting. The notice of a general meeting (and also a Members' requisition for a general meeting) shall state the agenda thereat, and no matters not arising out of the agenda shall be dealt with at that meeting.

9. *Election of Officers.*—At each annual general meeting all the officers and members of committee shall retire, but shall be eligible for re-election.

10. *Powers of Committee.*—The Committee may make rules for its meetings, and fix a quorum. Subject to such regulations not inconsistent with these Rules as may from time to time be prescribed by the members in general meeting, the Committee shall deal with all such matters as the appointment of dispensers, clerks, collectors and auditors, the making of arrangements with chemists, and the leasing of premises (if any) and shall manage all the other affairs of the Service not required to be dealt with at a general meeting.

11. *Members not to accept Lower Rates.*—No member shall take, or continue to treat, any contributory contract patient at a lower rate than the subscriptions prescribed in these Rules.

12. *Canvassing and Advertising.*—No canvassing or advertising shall be permitted by, or on behalf of, any member of the Service.

No member shall himself receive, or employ a Collector to collect, subscriptions from contributory contract patients.

13. *Members not to hold Club appointments.*—No member shall hold any appointment as Medical Officer to a club, or conduct any club of his own.

14. *Expulsion of Members.*—(a) *By action of a Division of the British Medical Association.*—If, at a meeting of any Division of the British Medical Association within the area of the Service, a member of the Service shall by a two-thirds majority of those present and voting be found guilty of violation of a rule or resolution of the Division with reference to professional conduct, or of other conduct detrimental to the honour and interests of the profession or calculated to bring the profession into disrepute, he shall *ipso facto* cease to be a member of the Service.

(b) *By Vote of Members.*—If any member shall wilfully commit any breach of the Rules of the Service (after having had his attention called to such breach by the Committee) he may be expelled from membership by the vote of three-fourths of the members present and voting at a general meeting.

15. *Alteration of Rules.*—These Rules shall not be altered except with the consent of two-thirds of the members present and voting at a general meeting, provided also that 14 days' notice of the terms of any proposed alteration of the Rules shall have been given in the agenda.

Subscribers.

16. *Admission.*—Subscribers shall be admitted by any acting member after medical examination. The Committee shall determine the Income Limit for admission as a Subscriber to the Service, but in no case shall the income exceed £2 per week. Should cases arise in which there may be doubt as to the eligibility of the applicants, they shall be referred to the Committee for its consideration, and the decision of the Committee on the question of eligibility shall be final. If any subscriber shall, in the opinion of the Committee, cease to be eligible, his name shall be removed from the list of subscribers.

17. *Subscriptions.*—The subscription to the Service for a person insured under the National (Health) Insurance Act, 1911, shall not be less than 3d. per week inclusive of drugs and cost of administration, provided that in the case of persons who may appear on the medical examination to be below the ordinary standard of health of subscribers, the Committee may prescribe special rates of subscription.

18. *Arrears.*—A Subscriber whose subscriptions are . . . weeks or more in arrear, at least one week's notice in writing having been given him, shall be struck off the list of subscribers, and shall not be re-admitted except on payment of all arrears or such part thereof as may be approved by the Committee.

19. *Choice of Medical Attendant.*—(a) A Subscriber shall, on admission, and at such other times as are provided by these Rules, choose his medical attendant from the Members of the Service who are willing to attend him, and shall for the time being be entitled to the services of such Member only.

(b) The contract of the Subscriber shall be with his medical attendant only, and not with the Service or the other Members of the Service.

(c) Except by the consent of both Members concerned, the Subscriber shall not change his medical

* The date March 1st is mentioned because, if these Services are set up generally throughout the country, and especially if they become co-ordinated in a centralised scheme, as will probably be desired, it will be necessary that reports as to their progress should be made to the Council of the Association, by the end of March, in order that a general report should be presented to the Annual Representative Meeting.

attendant more than once in six calendar months, giving at least a month's notice terminating on the 30th June or the 31st December.

(d) The member in charge of a case may, on the ground of wilful disobedience or misconduct on the part of the Subscriber, refuse further attendance, and shall in any such case forthwith report to the Committee.

20. *Subscribers' Cards.*—Every subscriber shall on admission be supplied with a card, which shall refer to these Rules and on which shall be printed such of these Rules as the Committee may think necessary, and on which also shall be set forth such information, including the name and hours of the Subscriber's medical attendant, as may be approved by the Committee. Failing production of the card, attendance may be refused.

21. *Privileges of Subscribers.*—A subscriber, in accordance with these Rules, shall be entitled to receive from his medical attendant so long as his subscriptions are not in arrear:—

(i.) Ordinary medical and surgical treatment at the (surgery of his medical attendant) *or* (dispensary of the Service) within the hours mentioned on his card.

(ii.) When his condition requires it, ordinary medical and surgical treatment at his place of dwelling (when that is within two miles of his medical attendant's house), other than night calls and special visits as hereinafter defined.

(iii.) All needful medicines and first dressings for wounds and other injuries.*

22. *Limitation of Benefits.*—Subscribers shall not be entitled, in consideration of their ordinary subscriptions:—

(i.) To medical service in respect of any of the following matters, except upon payment of the fees specified in the following Table:—

	£	s.	d.
(a) Confinements			
(b) Miscarriages			
(c) Vaccinations			
(d) Fractures			
(e) Dislocations			
(f) Consultations: Ordinary attendant			
Consultant			
(g) Administration of a general anæsthetic ...			
(h) Night visits, *i.e.*, visits made between 8 p.m. and 8 a.m., in response to calls received between those hours			
(i) Special visits, *i.e.*, visits made in response to, and on the same day as, calls received after 10.0 a.m., or made on Sundays, at the desire of the Subscriber ...			
(j) Certificates and reports			

* In any Service not providing medicines this provision will, of course, be deleted.

(ii.) To medical service in respect of illness the consequence of personal misconduct.

(iii.) To medical attendance in respect of—

(a) Illness arising from confinement or miscarriage within one month.

(b) Operations requiring local or general anæsthetics.

(c) Operative dentistry—

the fees for which shall be specially arranged.

*(iv.) To cod liver oil, linseed meal, leeches, serum, oxygen.

(v.) To bottles,* jars,* dressings or bandages (except for first dressings).

(vi.) To special examinations, *e.g.*, X-ray, bacteriological, &c.

(vii.) To examinations, court attendances, &c., under Common Law, and Workmen's Compensation, Employers' Liability and other Statutes.

(viii.) Attendance beyond a two mile radius from the house of the medical attendant.†

(ix.) To medical attendance in respect of tubercular disease when actually in receipt of sanatorium benefit under the National Insurance Act.

FINANCE.

Miscellaneous.

23. *Payments.*—All payments made by a Subscriber shall be the exclusive property of the Member who is his Medical Attendant at the time when such payment becomes due, subject only to a rateable deduction for the expenses of collection and the general expenses of the Service.

24. *Money Collected.*—All moneys collected shall be paid into a bank, to the credit of the Treasurer of the Service.

25. *Distribution of Subscriptions.*—The Treasurer shall, with the sanction of the Committee, on the usual quarter days, after provision for all current expenses, distribute the balance of the moneys collected among the Members of the Service entitled thereto.

26. *Sale of Member's Interest.*—A Member may sell to any person qualified for Membership his interest in the Service. The purchaser of a Member's interest shall become entitled thereto upon becoming a Member of the Service.

27. *Former Members.*—The subscriptions collected for any former Member of the Service, and not already paid to him before the date of termination of his membership, shall be paid to him as soon as conveniently may be, after the deduction of his share of the common expenses, and the Subscribers whose medical attendant he was shall have the right to choose as medical attendant any other member who is willing to attend.

* In Services not providing medicines these items would be deleted.

† It is suggested that mileage may be dealt with in one or other of the following ways:—

(a) by charging a definite fee in proportion to the distance.

(b) by an increase of the minimum capitation fee which would be applicable throughout the district, and which would obviate the necessity for any extra fee being charged for mileage.

28. *Collectors.*—Collectors shall be paid by salary and not by commission.

29. *Members List of Subscribers.*—The Committee shall supply each Member of the Service on becoming a Member with a List of Subscribers contracting with him and entitled to his services, and monthly with a list of additions and corrections.

30. *Interpretation.*—In these Rules, where the context does not forbid, words importing the masculine gender shall include the feminine, and words in the singular shall include the plural, and *vice versa.*

(II.)—PERSONS NOT INSURED UNDER THE NATIONAL INSURANCE ACT.

31. *Subscriptions.*—In the case of persons not insured under the National Insurance Act, arrangements may be made for their inclusion in any Public Medical Service, provided that the terms and conditions agreed upon are not in contravention of the following regulations and such others as may from time to time be made by the British Medical Association:—

(a) For the wife of an insured person, not herself an insured person, the payment should not be less than 2d. per week.

(b) For children the same rate should prevail but it is recognised that in some districts such payments may not be possible until a subsidy is received in respect of the children from the Insurance Fund, and the local profession may, in the meantime, decide to give their services at a lower rate.

(c) Provision may be made for families by payment of a weekly sum per family, irrespective of the size of the family, as is done in colliery districts, but the payment should be in some proportion to the individual subscriptions above mentioned.

B.

PUBLIC MEDICAL SERVICE SCHEME

(BASED UPON A PAYMENT PER ATTENDANCE SYSTEM)

FOR THE PROVISION OF MEDICAL ATTENDANCE AND TREATMENT FOR PERSONS UNABLE TO PAY ORDINARY MEDICAL CHARGES.

Object and Constitution.

1. *Object.*—The Public Medical Service of . . . . . (hereinafter called the Service) is an Association of Medical Practitioners, constituted to organise the provision of medical attendance and medicine for persons unable to pay the ordinary medical charges.

2. *Area.*—The area of the Service is . . . .*

3. *Members.*—Any duly registered medical practitioner practising within the area may become a member of the Service upon signing an undertaking to conform to these rules. Members may be either Honorary or Acting. An Honorary Member is a member who has signed the undertaking to abide by these rules but who does not engage to give medical attendance in connection with the Service. An Acting Member may be either Schedule or Non-Schedule. A "Schedule Member" is one who agrees to attend subscribers at the rate per visit or consultation hereinafter laid down. A "Non-Schedule" member, while binding himself by all other rules of the Service, adopts a higher minimum than that hereinafter laid down, and attends patients on the understanding that the difference between his fee and the fee allowed by the Service is paid by the subscriber.

4. *Officers and Committee.*—The Officers of the Service shall be a Chairman, Honorary Treasurer, and an Honorary Secretary, all of whom must be members of the Service. The Committee shall consist of the above Officers, together with..... members, of whom.....members shall be elected by the local Division or Branch of the British Medical Association.

Meetings and Government.

5. *Annual General Meeting.*—An ordinary general meeting of the members, called "The Annual Meeting," shall be held before March 1st of each year.† At this meeting the Officers and members of the Committee shall be elected, with the exception of those to be elected by the local Division or Branch of the British Medical Association, and the Annual Report of the Committee and Statement of Accounts of the Service for the preceding year shall be presented.

6. *Special Meeting.*—A special general meeting of the members may be convened at any time by the Committee, and shall be convened by the Secretary at the earliest practicable day, and in any event within twenty-one days of receiving the requisition of ..... members.

7. *Quorum.*—At a general meeting (ordinary or special).....members shall be a quorum.

8. *Notice.*—Subject to the provision hereinafter contained for fourteen days' notice in the case of a proposed alteration of Rules, at least seven days' notice of every general meeting and of the business thereof shall be given by the Secretary to all members, but the accidental omission to give notice to any member shall not invalidate the proceedings of a Meeting. The notice of a general meeting (and also a member's requisition for a general meeting) shall state the agenda thereat, and no matters not arising out of the agenda shall be dealt with at that meeting.

9. *Election of Officers.*—At each annual general meeting all the Officers and members of Committee shall retire, but shall be eligible for re-election.

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*As far as possible the area of a Public Medical Service should correspond with one or more of the areas defined under the provisions of the National Insurance Act, but no set rule would meet all cases. Divisions must therefore draft a Rule to suit their local conditions. In the case of a large area, such as a County, Sub-Divisions might be formed, each with its own Committee, income limit, officers and officials.

† The date March 1st is mentioned because if these Services are set up generally throughout the country and especially if they become co-ordinated in a centralised scheme, as will probably be desired, it will be necessary that reports as to their progress should be made to the Council of the Association by the end of March, in order that a general report should be presented to the Annual Representative Meeting.

10. *Powers of Committee.*—The Committee may make rules for its meetings, and fix a quorum. Subject to such regulations not inconsistent with these Rules as may from time to time be prescribed by the members in general meeting, the Committee shall deal with all such matters as the appointment of dispensers, clerks, collectors and auditors, the making of arrangements with chemists, and the leasing of premises (if any) and shall manage all the other affairs of the Service not required to be dealt with at a general meeting.

11. *Members not to hold Contributory Contract Appointments.*—No member shall hold any contributory contract practice appointment whatsoever, except with the consent of the Committee of the Service.

12. *Members not to Accept Lower Fees.*—No member shall take, or continue to treat, any patients at lower fees than those prescribed in these Rules.

13. *Canvassing and Advertising.*—No canvassing or advertising shall be permitted by, or on behalf of, any member of the Service.

No member shall himself receive, or employ a collector to collect subscriptions from contributory contract patients.

14. *Expulsion of Members:* (a) *By action of a Division of the British Medical Association.*—If, at a meeting of any Division of the British Medical Association within the area of the Service, a member of the Service shall by a two-thirds majority of those present and voting be found guilty of violation of a Rule or Resolution of the Division with reference to professional conduct, or of other conduct detrimental to the honour and interests of the profession or calculated to bring the profession into disrepute, he shall, *ipso facto,* cease to be a member of the Service.

(b) *By Vote of Members.*—If any member shall either wilfully commit any breach of the Rules of the Service, or shall be guilty of conduct tending to increase unduly his claim to a share in the distribution of the moneys collected, he may (after having had his attention called by the Committee to such breach or conduct as the case may be) be expelled from membership by the vote of three-fourths of the members present and voting at a general meeting.

15. *Alteration of Rules.*—These Rules shall not be altered except with the consent of two-thirds of the members present and voting at a general meeting, provided also that fourteen days' notice of the terms of any proposed alteration of the Rules shall have been given in the agenda.

Subscribers.

16. *Admission.*—Subscribers shall be admitted by any acting member after medical examination. The Committee shall determine the Income Limit for admission as a subscriber to the Service, but in no case shall the income exceed £2 per week. Should cases arise in which there may be doubt as to the eligibility of the applicants, they shall be referred to the Committee for its consideration, and the decision of the Committee on the question of eligibility shall be final. If any subscriber shall in the opinion of the Committee cease to be eligible, his name shall be removed from the list of subscribers.

17. *Subscriptions.*—The subscription to the Service for a person insured under the National (Health) Insurance Act, 1911, shall not be less than 3d. per week inclusive of drugs and cost of administration, provided that in the case of persons who may appear on the medical examination to be below the ordinary standard of health of subscribers, the Committee may prescribe special rates of subscription.

18. *Arrears.*—A subscriber whose subscriptions are..... .....weeks or more in arrear, at least one week's notice in writing having been given him, shall be struck off the list of subscribers, and shall not be readmitted except on payment of all arrears or such part thereof as may be approved by the Committee.

19. *Choice of Medical Attendant.*—(a) A subscriber shall, on admission, and at such other times as are provided by these Rules, choose his medical attendant from the members of the Service who are willing to attend him, and shall for the time being be entitled to the services of such member only.

(b) The contract of the subscriber shall be with his medical attendant only, and not with the Service or other members of the service.

(c) Except by the consent of both members concerned, the subscriber shall not change his medical attendant more than once in six calendar months, giving at least a month's notice terminating on the 30th June or the 31st December.

(d) The member in charge of a case may, on the ground of wilful disobedience or misconduct on the part of the subscriber, refuse further attendance, and shall in any such case forthwith report to the Committee.

20. *Subscribers' Cards.*—Every subscriber shall on admission be supplied with a card which shall refer to these rules and on which shall be printed such of these rules as the Committee may think necessary, and on which also shall be set forth such information, including the name and hours of the subscriber's medical attendant, as may be approved by the Committee. Failing production of the card, attendance may be refused.

21. *Privileges of Subscribers.*—A subscriber in accordance with these rules, shall be entitled to receive from his medical attendant, so long as his subscriptions are not in arrear:—

(i.) Ordinary medical and surgical treatment at the (surgery of his medical attendant) *or* (dispensary of the Service) within the hours mentioned on his card.

(ii.) When his condition requires it, ordinary medical and surgical treatment at his place of dwelling (when that is within two miles of his medical attendant's house), other than night calls and special visits as hereinafter defined.

(iii.) All needful medicines and first dressings for wounds and other injuries.*

* In any Service not providing medicines this provision will, of course, be deleted.

22. *Limitation of Benefits.*—Subscribers shall not be entitled in consideration of their ordinary subscriptions:—

(i.) To medical service in respect of any of the following matters, except upon payment of the fees specified in the following Table:—

(a) Confinements ... ...
(b) Miscarriages ... ...
(c) Vaccinations ... ...
(d) Fractures ... ...
(e) Dislocations ... ...
(f) Consultations: Ordinary attendant ... ...
Consultant ... ...
(g) Administration of a general anæsthetic ...
(h) Night visits, *i.e.*, visits made between 8.0 p.m. to 8.0 a.m. in response to calls received between those hours ... ...
(i) Special visits., *i.e.*, visits made in response to, and on the same day as, calls received after 10.0 a.m. or made on Sundays, at the desire of the subscriber
(j) Certificates and Reports

(ii.) To medical service in respect of illness the consequence of personal misconduct.

(iii.) To medical attendance in respect of

(a) Illness arising from confinement or miscarriage within one month.

(b) Operations requiring local or general anæsthetics.

(c) Operative dentistry;

the fees for which shall be specially arranged.

(iv.) To cod liver oil, linseed meal, leeches, serum, oxygen.*

(v.) To bottles,* jars,* dressings or bandages (except for first dressings).

(vi.) To special examinations, *e.g.*, X-ray, bacteriological, &c.

(vii.) To examinations, court attendances, &c., under Common Law and Workmen's Compensation, Employers' Liability, and other Statutes.

(viii.) Attendance beyond a two mile radius from the house of the medical attendant.†

(ix.) To medical attendance in respect of tubercular disease, when actually in receipt of sanatorium benefit under the National Insurance Act.

* In Services not providing medicines these items would be deleted.

† It is suggested that mileage may be dealt with in one or other of the following ways:—

(a) by charging a definite fee in proportion to the distance;

(b) by an increase of the minimum subscription which would be applicable throughout the district, and which would take the place of an extra fee being charged for mileage.

Finance.

23. *Fees.*—The following fees shall be those paid to Schedule members:—

Visit	2s.
Visit and medicine ...	2s. 6d.
Consultation in surgery ...	1s. 6d.
Do., with medicine ...	2s.

24. *Money collected.*—All moneys collected shall be paid into a bank, and placed to the credit of the Treasurer of the Service.

25. *Distribution of Subscriptions.*—(a) Every member shall be provided with a slip, whether in the form of a card or otherwise, relating to each subscriber whose medical attendant he is, in the general form set out in the Appendix hereto, on which shall be printed the name of the Service and on which shall be provision for the registration of

(1) Name of member.
(2) Name and address of subscriber.
(3) Each visit, consultation, etc., made by member.
(4) Diagnosis.
(5) Additional notes of treatment.

(b) Each member shall duly enter on such slip the particulars of each visit paid or consultation made, and shall return monthly to the office of the Service any slip on which entries have been made. Should the illness for which he is attending a subscriber continue over the date on which the slip should be returned, the slip should nevertheless be sent in and further entries made on a second (or third) slip which should be clearly marked as a continuation slip.

(c) It shall be the duty of the Secretary of the Service to classify such slips, and as soon as possible after each quarter day lay before the Committee a statement of the amount due for professional services to each member of the Service, and on the direction of the Committee such sum shall, as far as possible, be paid to the member forthwith out of the moneys collected, always providing that it shall be competent for the Committee to suspend payment of any member's account pending an enquiry into any account when the Committee considers such enquiry is desirable.

26. *Sale of Member's Interest.*—A member may sell to any person qualified for membership his interest in the Service. The purchaser of a member's interest shall become entitled thereto upon becoming a member of the Service.

27. *Former Members.*—Any sums payable to any former member of the Service, and not already paid to him before the date of termination of his membership, shall be paid to him as soon as conveniently may be, after the deduction of his share of the common expenses, and the subscribers whose medical attendant he was, shall have the right to choose as medical attendant any other member who is willing to attend.

28. *Collectors.*—Collectors shall be paid by salary and not by commission.

29. *List of Members.*—The Committee shall draw up, and from time to time revise, a list of all acting

members, and shall classify them under the headings Schedule and Non-schedule members, and shall cause a copy of the said list to be handed to each subscriber on admission. The said list shall also contain a clear intimation that Schedule members agree to attend subscribers at the rates set forth herein, and that Non-schedule members attend only at higher rates than these, to be agreed in every case privately between the subscriber and the member, and that in the case of Non-schedule members the subscription covers only so much of the fee as is equal to a fee at the rates charged by Schedule members set forth above, and that the balance of the fee is payable by the subscriber as an addition to his subscription.

30. *Member's List of Subscribers.*—The Committee will supply each member of the Service on becoming a member with a list of subscribers contracting with him and entitled to his services, and monthly with a list of additions and corrections.

31. *Investigation of Claims.*—It shall be the duty of the Committee, or a sub-committee appointed by the Committee for this purpose, to examine not less often than every three months the slips sent in by members with a view to the detection of any conduct tending to increase unduly the claims of members to share in the distribution of the moneys collected, and it shall be competent for the Committee, either originally, or on the report of any such sub-committee, to summon before it any member whom the Committee may consider to have been guilty of any such conduct and to caution or admonish him or, in the case of a repetition of such conduct after such caution or admonition, to refer the question of his expulsion to the members under the provisions of the rule relating to expulsion.

32. *Interpretation.*—In these rules, where the context does not forbid, words importing the masculine gender shall include the feminine, and words in the singular shall include the plural, and *vice versa.*

APPENDIX.

FORM OF MEDICAL PRACTITIONER'S SLIP OR CARD.

.....MEDICAL SERVICE.

Name and address of Medical Practitioner.....

Name and address of Subscriber.....

NOTE.—The following symbols should be used:—

H. = visit. S. = consultation in Surgery.
H.M. = visit and medicine. S.M. = ditto, with medicine.

Date.	Nature of Attendance.	Diagnosis and Note of Progress.			
April					
1	S.M.	? Influenza			
2	H.				
3	H.M.	Pneumonia			
"	"	"			
"	"	"			
"	"	"			
"	"	"			
10	H.	Empyema			

NATIONAL INSURANCE ACT.

SUGGESTED NOMINATION BY ASSOCIATION OF MEDICAL PRACTITIONERS TO SERVE UPON PROPOSED PROVISIONAL INSURANCE COMMITTEES.

THE following letter has been addressed to the Honorary Secretaries of Divisions and Provisional Medical Committees in England, Scotland, and Wales:—

STATE SICKNESS INSURANCE COMMITTEE.

British Medical Association,
Medical Department,
429, Strand, London, W.C.

Dear Sir,

National Insurance Act.
Nomination by Association of Medical Practitioners to Serve upon Proposed Provisional Insurance Committees.

The State Sickness Insurance Committee at its meeting on Thursday, May 30th last, considered the following communication received from the National Health Insurance Commission (England) with reference to the question of the nomination by the Association of practitioners to serve upon Provisional Insurance Committees, which it is proposed to set up in connexion with the Act:

National Health Insurance Commission (England),
Buckingham Gate, London, S.W.,
May 24th, 1912.

Sir,

I am directed by the National Health Insurance Commission (England) to state that they have had under consideration the question of constituting Insurance Committees for counties and county boroughs in England, and they would be glad to have the assistance of the British Medical Association in regard to the appointment of medical members of these Committees.

Section 59 of the Act provides that an Insurance Committee shall be constituted for every county or county borough to be composed as follows:

(*a*) Three-fifths to represent insured persons resident in the county or county borough who are members of approved societies and who are deposit contributors, in proportion to their respective members.

(*b*) One-fifth to be appointed by the council of the county or county borough.

(*c*) Two members to be elected in manner provided by regulations made by the Insurance Commissioners, either by any association of duly qualified medical practitioners resident in the county or county borough which may have been formed for that purpose under such regulations, or, if no such association has been formed, by such practitioners.

(*d*) One, two, or three (according to the size of the Committee) medical practitioners to be appointed by the council of the county or county borough.

(*e*) The remaining members to be appointed by the Insurance Commissioners.

The final constitution of Insurance Committees cannot be determined until the number of insured persons resident in the county or county borough and the respective number of members of approved societies and deposit contributors has been ascertained. Inasmuch as no person can enter into insurance before July 15th it is evident that special arrangements must be made if the Insurance Committees are to be established by that date.

The Commissioners accordingly propose to exercise the powers conferred on them by Section 78 of the Act, which enable them to do anything which appears to them necessary or expedient for the establishment of Insurance Committees, and in pursuance of these powers to make arrangements for the setting up of Provisional Committees which will hold office until Committees can be regularly constituted in accordance with the provisions of the Act.

The Commissioners feel assured that the British Medical Association will share their view that for many reasons it is important that the medical members of each Provisional Insurance Committee should be included in its membership from the outset, when many matters of great importance from the medical point of view and that of the public health will necessarily arise for consideration—for example, the making of arrangements for sanatorium benefit.

As the short amount of time available between now and July 15th will not permit of the selection of medical members of the committees in precisely the manner prescribed by Section 59 (2) (*c*), the Commissioners have come to the conclusion that the most convenient arrangement in the circumstances would be for the British Medical Association, if they are willing to do so, to assist the Commissioners by obtaining from the various District or Provisional Committees of the Association the names of two representatives for each Insurance Committee.

The Commissioners would be glad to receive the complete list of the names and addresses of the gentlemen thus selected not later than June 14th, and the Commissioners would thereupon appoint them upon the Committee.

A list of the administrative counties and county boroughs for which Insurance Committees are to be set up is enclosed for your information.

I am to add that the Commission are adopting this arrangement, of obtaining from a central representative body suitable names for inclusion on each Insurance Committee throughout England, in regard to the other main elements of each Insurance Committee—for example, the large friendly societies, the trade unions, and the industrial assurance companies that are likely to be approved societies under the Act, and it is hoped in this manner to secure a list of thoroughly suitable names for the composition of these first and strictly provisional Insurance Committees, so that the meetings of the Committees may commence at the beginning of July.

I am, Sir, your obedient Servant,
(Signed) ROBERT L. MORANT.

The Secretary,
British Medical Association,
429, Strand, W.C.

In considering this communication the Committee took into consideration the terms of the following Minutes 42, 61, and 78 of the Special Representative Meeting, February, 1912, namely:

Minute 42.—Resolved: That this Representative Meeting direct the Council to inform, in plain and unmistakable language, the Commissioners appointed under the Insurance Act, 1911, that unless the minimum demands of the Association be embodied in the Regulations to be issued by the Commissioners, in such a manner as shall be effectual and permanent, with a view to having the same embodied in an amending Act, it is the intention of the British Medical Association to call upon all its members and upon all other medical practitioners to decline to form panels or undertake any other medical duties which may be assigned to them under the Act, in conformity with the undertaking which has already been signed by over 26,000 medical practitioners.

Minute 61.—Resolved: That while the British Medical Association is willing that members of the medical profession shall provisionally join the Advisory Committees, nevertheless it will use its best endeavours to ensure their resignation unless the six cardinal principles have been granted by amendment of the Insurance Act, by Regulation, Order, or otherwise, and that it be an instruction to the Council to provide that all practitioners who are supported by the Association for membership of the Advisory Committees shall have pledged themselves previously to vacate their seats if elected, should the British Medical Association determine to cease negotiations with reference to the National Insurance Act.

Minute 78.—Resolved: That it be an instruction to the Council to take all possible steps to ensure that no member shall take any office or work under the National Insurance Act other than that of the Advisory Committee until such time as the minimum demands of the profession are conceded in the Regulations or an amending Act.

The following reply has been forwarded to the Commissioners:

Offices of the British Medical Association,
Medical Department,
429, Strand, London, W.C.,
May 31st, 1912.

Sir,

I am directed by the State Sickness Insurance Committee of the British Medical Association to inform you that they had before them yesterday your letter of the 24th inst., asking for the assistance of the British Medical Association in regard to the appointment of medical members of the proposed Provisional Insurance Committees.

The Committee instructs me to say that, acting under decisions of the Special Representative Meeting, February, 1912, it is impossible for the Association to assist the Commissioners in the manner indicated—namely, by obtaining from various Provisional Medical Committees of the Association the names of representatives for the suggested Provisional Insurance Committees—until such time as the Association is satisfied that the minimum demands of the medical profession in regard to the Act are, or will be, conceded.

I am, Sir,
Your obedient servant,
(Signed) ALFRED COX,
Medical Secretary.

Sir Robert L. Morant, Chairman,
National Health Insurance Commission (England),
Buckingham Gate, S.W.

I am instructed by the Committee to forward the above correspondence to all Honorary Secretaries of Divisions and of Provisional Medical Committees, with a request that they will bring the matter before an early meeting of their Division or Committee, as the case may be, for their information.

Public Medical Service Schemes.

The schemes for Public Medical Services—(*a*) on a capitation system, (*b*) on a payment per attendance system—will appear in the SUPPLEMENT to the JOURNAL of June 8th, 1912.

These schemes are not in final form, but are issued for the consideration and comment of the Divisions. As the State Sickness Insurance Committee is anxious to submit a report upon this subject to the forthcoming Annual Representative Meeting, any expressions of opinion which Divisions may desire to submit to the Committee should reach me not later than first post on Wednesday, June 26th next. The Committee quite realizes that this notice is short, but it has been unavoidable owing to unforeseen delays, chiefly of a legal nature. It is hoped, however, that Divisions will make a special effort to consider the schemes and forward their comments within the time stated.

Any comments should be forwarded through the Divisions, and not through the Provisional Medical Committees.

A note will be prefixed to the schemes asking members to preserve the SUPPLEMENT until the schemes have been considered locally; but as this is the only form in which these schemes will be available, you are requested to urge on the practitioners of your neighbourhood, in any notice or agenda you are sending out, the necessity of keeping this SUPPLEMENT.

I am,
Yours faithfully,
ALFRED COX,
Medical Secretary.

To Honorary Secretaries of Divisions and Provisional Medical Committees in England, Scotland, and Wales.

Hospitals and Asylums.

NATIONAL CHILDREN'S HOSPITAL, DUBLIN.

THE report presented to the annual meeting of the supporters of the National Children's Hospital, Dublin, stated that the work of the hospital had increased during the year; there were over 7,000 attendances at the dispensary and 256 in-patients. During the year an annexe was built in connexion with the operating theatre, and thoroughly equipped in every detail with all modern requisites. The report contained the following reference to infantile mortality: "Notwithstanding the great improvement that has taken place since the appointments of female sanitary inspectors by the Public Health Department of the Dublin Corporation and the dissemination of useful knowledge on infantile hygiene, the mortality still remains very high. It is a melancholy fact to record that, out of every 1,000 children born, 165 died on an average during their first year, and 250 died before attaining their fifth year; and in some towns the mortality in the first year reached 250 per 1,000." The Recorder of Dublin, in proposing the adoption of the report, paid a high tribute to the work carried on by the hospital during the ninety years of existence, laying special stress on the help that it afforded to the poor in their struggle for existence by relieving and correcting deformities during childhood.

British Medical Association.

EIGHTIETH ANNUAL MEETING, LIVERPOOL, JULY, 1912.

PROGRAMME OF BUSINESS.

President: Professor ROBERT SAUNDBY, M.D., LL.D., F.R.C.P., Professor of Medicine, University of Birmingham.

President-elect: Sir JAMES BARR, M.D., LL.D., F.R.C.P., Consulting Physician, Royal Infirmary, Liverpool.

Chairman of Representative Meetings: EWEN JOHN MACLEAN, M.D., Gynaecologist, Cardiff Infirmary.

Chairman of Council: JAMES ALEXANDER MACDONALD, M.D., LL.D., M.Ch., R.U.I., Honorary Physician, Taunton and Somerset Hospital, Taunton.

Treasurer: EDWIN RAYNER, M.D.Lond., F.R.C.S., Consulting Surgeon, Stockport Infirmary, Stockport.

The Eightieth Annual Meeting of the British Medical Association will be held in Liverpool in July, 1912. The President's Address will be delivered on Tuesday, July 23rd, and the Sections will meet on the three following days. The Annual Representative Meeting will begin on Friday, July 19th, 1912.

The Address in Medicine will be delivered by GEORGE ALEXANDER GIBSON, M.D., D.Sc., LL.D., F.R.C.P.Edin., Physician, Edinburgh Royal Infirmary.

The Address in Surgery will be delivered by FRANK THOMAS PAUL, Ch.M., F.R.C.S., Surgeon, Liverpool Royal Infirmary.

THE SECTIONS.

The scientific business of the Meeting will be conducted in twenty Sections, which will meet on Wednesday, July 24th, Thursday, July 25th, and Friday, July 26th.

The President, Vice-President, and Honorary Secretary of each Section constitute a Committee of Reference for that Section, and exercise the power of inviting, accepting, or declining any paper, and of arranging the order in which accepted papers shall be read. Communications with respect to papers should be addressed to one of the Honorary Secretaries.

A paper read in the Section must not exceed fifteen minutes, and no subsequent speech must exceed ten minutes.

Papers read are the property of the British Medical Association, and cannot be published elsewhere than in the BRITISH MEDICAL JOURNAL *without special permission.*

The following twenty Sections have been authorized by the Council:

ANAESTHETICS.

President: DUDLEY WILMOT BUXTON, M.D., B.S., London.

Vice-Presidents: FRANCIS WILLIAM BAILEY, M.R.C.S., Liverpool; WILLIAM FINGLAND, L.R.C.P., Liverpool; WILLIAM JOSEPH MCCARDIE, M.B., Birmingham.

Honorary Secretaries: VIVIAN CHASTEL DE BOINVILLE, M.D., South Grange, Aigburth Road, Liverpool; CHARLES CARTER BRAINE, F.R.C.S., 26, Wimpole Street, W.

Wednesday, July 24th, 10 a.m.—Discussion on Intravenous Infusion Anaesthesia. To be opened by Mr. FELIX ROOD; followed by Messrs. G. A. H. Barton and V. G. L. Fielden.

11 a.m.—Discussion on the Importance of Affording the Anaesthetist an Opportunity of making a Thorough Examination of the Patient some days previous to a Contemplated Operation, and after the Nature of the Operation has been Disclosed. To be opened by Mr ALEXANDER WILSON; followed by Messrs. L. Kirby Thomas, J. W. King, and Sydney Haynes.

The following is a *précis* of the paper introductory of the first discussion:

The origin and history of the intravenous infusion method of administration. Earlier types of apparatus and improved forms lately devised. Technique of method now generally employed. Summary of a number of cases. The position this form of anaesthesia occupies and is likely to occupy in the clinical practice of anaesthesia.

The following is a *précis* of the paper introductory of the second discussion:

The advantages claimed are: More accuracy in selecting the anaesthetic or analgesic, and the methods which will best fulfil the purposes of (1) safeguarding the patient by minimizing operative shock, preventing or lessening post-operative effects—that is, acetonaemia, glycosuria, pulmonary complications; (2) produce the best results for the surgeon and so enable him to do the utmost for the patient in the shortest possible time. The methods suitable for special regions and special types of operation may be grouped as: (*a*) Intratracheal insufflation of ether; (*b*) intravenous infusion; (*c*) rectal injection, or irrigation with ether in saline; (*d*) inhalation after alkaloids; (*e*) intrathecal injection; (*f*) various methods of local analgesia. The paper also invites members to state what factors, as a result of their examination, would influence them in selecting one of the above methods.

Thursday, July 25th, 10 a.m.—Discussion on the Comparison of Methods Employed for Inducing Anaesthesia and Analgesia respectively, with Special Reference to After-Effects. To be opened by Mr. C. A. LEEDHAM-GREEN; followed by Messrs. H. M. Page, G. A. H. Barton, and Sydney Haynes.

The following is a *précis* of the opening paper:

(A) Methods: Anaesthesia by (1) ether, (2) chloroform; analgesia by (1) intradural injection, (2) local infiltration, (3) regional.

(B) After-effects—incidence of fatality—respiratory—circulatory. Metabolism—for example, toxaemia. Renal.

Papers:

EHRENFRIED, Dr. (Boston, U.S.A.): The Intratracheal Administration of Ether. Accompanied by a demonstration of an apparatus for the purpose.

KELLY, Mr. R. E.: The Intratracheal Administration of Ether by a Modified Elsberg's Apparatus; with Records of Cases.

Friday, July 26th, 10 a.m.—Discussion on Employment of Alkaloidal Bodies prior to Inhalation, Infusion or Subdural Injection with a view to abrogating Deleterious After-Effects. To be opened by Mr. F. W. BAILEY; followed by Messrs. G. S. Hett, L. Kirkby Thomas, G. A. H. Barton, V. G. L. Fielden, and J. W. King.

The following is a *précis* of the opening paper: Alkaloidal bodies administered before anaesthesia, and their choice. Advisability or otherwise of adopting them in all cases. Periods of administration. After-effects prior, during, and subsequently to complete anaesthesia.

11 a.m.—Paper:

APPERLEY, Dr. W. R. E.: The Effect of Ether and Chloroform on the Liver and Kidneys in Health and in Certain Infective Conditions.

Museum.

The Committee of the Pathological Museum will devote a section to an exhibition of modern anaesthetic apparatus. The Committee is anxious to gather together a thoroughly representative collection, and invites members to send as soon as possible a list of the exhibits they may desire to make to Dr. Ernest Glynn, Honorary Secretary of the Museum Committee, The University, Liverpool.

ANATOMY.

President: WILLIAM WRIGHT, M.B., D.Sc., F.R.C.S., London Hospital Medical School.

Vice-Presidents: DOUGLAS DOUGLAS-CRAWFORD, M.B., F.R.C.S., Liverpool; Professor AUCKLAND CAMPBELL GEDDES, M.D., Dublin; Professor GRAFTON ELLIOT SMITH, M.A., M.D., F.R.S., Manchester; ALEXANDER MACPHAIL, M.B., C.M., London.

Honorary Secretaries: WM. PERCY GOWLAND, M.D., 379, Edge Lane, Liverpool; SAMUEL ERNEST WHITNALL, M.A., M.B., The Old Rectory Farm, Kidlington, Oxford.

Wednesday, July 24th.—Discussion on Development and Growth of Bone, Normal and Abnormal. To be opened by Sir WILLIAM MACEWEN, F.R.S., F.R.C.S.

Thursday, July 25th.—Papers.

Friday, July 26th.—Discussion (in conjunction with Electro-Therapeutic Section) on the Normal Stomach. To be opened by Dr. HERTZ.

Papers.

BACTERIOLOGY.

President: Professor JAMES RITCHIE, M.A., B.Sc., M.D., Royal College of Physicians Laboratory, Edinburgh.

Vice-Presidents: Professor JAMES MARTIN BEATTIE, M.A., M.D., University, Sheffield; JOHN CHARLES GRANT LEDINGHAM, M.A., D.Sc., M.B., Lister Institute, Chelsea Gardens, S.W.; Professor RICHARD TANNER HEWLETT, M.D., F.R.C.P., King's College, London.

Honorary Secretaries: Professor EDWARD EMRYS-ROBERTS, M.D., University College of South Wales and Monmouthshire, Cardiff; ROBERT STENHOUSE WILLIAMS, M.B., Hygienic Laboratories, Ashton Hall, University, Liverpool; THOS. ARNOLD JOHNSTON, M.D., 19, De Montfort Street, Leicester.

The following is the provisional programme:

Wednesday, July 24th.—Joint Discussion with the Section of State Medicine on *B. Coli*, its Varieties and the Significance of their Occurrence in Water Supplies. To be introduced by Drs. A. C. HOUSTON, W. G. SAVAGE, R. M. BUCHANAN, and W. WRIGHT.

Thursday, July 25th.—Papers on bacteriological subjects.

Friday, July 26th.—Joint Discussion with the Section of Pharmacology on the Standardization and Control of Vaccines. It will be introduced by the following papers: The Preparation and Standardization of Bacterial Vaccines; a Plea for Uniformity of Method, by J. EYRE, M.D. The Therapeutic Use of Vaccines, with Special Reference to the Value of Laboratory Tests, by J. FREEMAN, M.A., B.M. Drs. L. C. Peel Ritchie, Carmalt Jones, Otto Grünbaum, and Ralph Stockman will take part in the discussion.

DERMATOLOGY.

President: Professor WALTER G. SMITH, M.D., F.R.C.P., Dublin.

Vice-Presidents: Professor ROBERT ALFRED BOLAM, M.D., M.R.C.P., Newcastle-on-Tyne; HUGH LESLIE ROBERTS, M.D., Liverpool; G. G. S. STOPFORD-TAYLOR, M.D., Liverpool.

Honorary Secretaries: ROBERT WM. MCKENNA, M.A., M.D., 26, Rodney Street, Liverpool; JAMES EUSTACE RADCLYFFE MCDONAGH, F.R.C.S., 19, Harley Street, London, W.; ELIAS BELL PURDON, M.B., 60, Packenham Place, Belfast.

The following preliminary arrangements have been made:

Wednesday, July 24th.—Discussion on The Nature, Causation and Treatment of Seborrhoea and Acne. To be opened by Dr. ARTHUR WHITFIELD (London); followed by Drs. Phineas Abraham, A. Fleming, A. J. Hall, R. Sabouraud (Paris), Stopford-Taylor, and J. Goodwin Tomkinson.

On Thursday, July 25th, and Friday, July 26th, arrangements will be made for the demonstration of cases before the papers are read.

The following papers have been accepted:

DE BEURMANN, Dr. Lucien (Paris). Sporotrichosis.
BUNCH, Dr. J. L. Naevi and their Treatment; based on 2,000 Cases.
MCDONAGH, Mr. A Rational Method of Treating Syphilis.
MEACHEN, Dr. G. Norman. Morbid Conditions of the Nails: A Plea for their more Systematic Study.
SAVATARD, Dr. Louis. (1) Sebaceous Carcinoma and its Relation to Rodent Ulcer. (2) Sarcoma on Lupus Scar Tissue.
TOMKINSON, Dr. J. Goodwin. The Vacuum Electrode in Neurodermatitis.
MADDEN, Professor (Cairo). A Case of Papilliform Lesions (Lymphangiomata?) of the Scrotum, with Multiple Petechial Spots on the Trunk and Limbs.
WALSH, Dr. David. Cardiac and Vascular Conditions in Skin Diseases.
STOPFORD-TAYLOR, Dr. Types of Dermatitis Seborrhoeica.

The Committee of the Pathological Museum has decided to devote a section to Dermatological exhibits, and is anxious to gather together a thoroughly representative collection. Any plates, photographs, casts, microscopical specimens or cultures illustrating rare or interesting cases, or recent research, will be welcomed, but the Committee would like to have as complete an exhibition as possible of the results of treatment with carbon dioxide snow, and also of syphilitic and tuberculous affections of the skin.

Intending contributors are invited to send the list of the exhibits they desire to make to Dr. Ernest Glynn, Secretary of the Museum Committee, The University, Liverpool.

DISEASES OF CHILDREN, INCLUDING ORTHOPAEDICS.

President: ROBERT JONES, Ch.M., F.R.C.S.E., Liverpool.

Vice-Presidents: EDRED MOSS CORNER, M.A., F.R.C.S., London; PETER DAVIDSON, M.A., M.B., Liverpool; CHARLES JOHN MACALISTER, M.D., F.R.C.P., Liverpool; THOS. HORROCKS OPENSHAW, C.M.G., M.S., F.R.C.S., London.

Honorary Secretaries: ROBT. CRAIG DUN, M.B., B.Sc., F.R.C.S., 73, Rodney Street, Liverpool; NICHOLAS PERCY MARSH, M.B., 7, Abercromby Square, Liverpool; CLIVE RIVIERE, M.D., F.R.C.P., 19, Queen Anne Street, London, W.

The following subjects have been selected for discussion:

Wednesday, July 24th.—Discussion on the After-results of the Major Operations for Tuberculous Disease of Joints. To be opened by Mr. HAROLD J. STILES, F.R.C.S.Edin.; followed by Messrs. A. H. Tubby, H. M. Gray (Aberdeen), R. C. Elmslie, H. S. Clogg, Douglas Drew, E. Grey Turner (Newcastle), H. C. Morton (Clifton).

Thursday, July 25th.—Discussion on the Dyspepsias of Childhood after the Age of Infancy. To be opened by Dr. ROBERT HUTCHISON; followed by Dr. Edmund Cautley, Dr. Dingwall Fordyce (Edinburgh), and Dr. Frank Eve (Hull).

The following is a syllabus of the opening remarks by Dr. ROBERT HUTCHISON:

Dyspepsia after the period of infancy may be due to disorder of function (1) in the stomach, (2) in the intestine, (3) in the liver. Clinically such disorders often exist in combination. *Gastric Dyspepsia*: It is admitted that dyspepsia from organic disease of the stomach is rare in childhood. It is open to discussion whether gastritis is a possible exception to this rule. Functional gastric disorders may affect (*a*) secretion, (*b*) motility, (*c*) sensibility. The absence of test-meal evidence makes it difficult to dogmatize as to the frequency of disorders of secretion, and more evidence of this sort is much needed, but it is probable that both hyperchlorhydria and achylia occur. It is suggested, however, that the commonest functional affection of the stomach at this period is a defect of motility (atonic dyspepsia). Disorder of sensibility in the direction of a hyperaesthesia (gastralgia) may occur, but in the writer's opinion is not common, and its existence is impossible to prove. *Intestinal Dyspepsia*: This is, perhaps, the commonest form of digestive disorder in childhood, and results in such symptoms as flatulence, colic, constipation and diarrhoea, and "food fever." The pathology of intestinal dyspepsia is obscure. Discussion may be directed to the following hypotheses: (1) That it is due to defect of certain ferments; (2) that it results from the presence of an abnormal intestinal flora; (3) that it is the consequence of a relative excess of one nutritive constituent (carbohydrates) in the food. The writer favours the last of these views. *Hepatic Dyspepsia*: Disorder of the liver may reasonably be inferred when symptoms of dyspepsia occur along with a comparative absence of colouring matter in the stools. It will be generally admitted that this is not an uncommon occurrence in childhood, and its relation to such definite clinical conditions as "acholia," "periodic vomiting," "migraine," and "bilious attacks" is worth discussing. The exact nature of the disorder of liver function in these cases is obscure. Is it the result (1) of a primary functional arrest of bile secretion, or (2) of a temporary overloading of the liver cells with glycogen or fat? The *pros* and *cons* of these views. Mode in which these different basal types of disordered function are combined to make up the well-recognized clinical forms of dyspepsia—for example, "mucous disease." As regards the *etiology* of dyspepsia in childhood, stress must be laid upon the importance of predisposition (congenital neurasthenia, "morbus asthenias") as a factor. It will be suggested that the importance of dental caries is overestimated, and that amongst dietetic causes the chief is an excessive use of carbohydrate foods and slops. The part played by physical and mental overstrain must also be emphasized. In discussing

treatment the relative importance of general and local treatment must be considered, and it is contended that the former is by far the more important, and involves regulation of the whole life of the child. The writer is convinced of the immense value of "change of air" in treatment, but its *modus operandi* is a subject for discussion. Finally, the two propositions will be laid down that, of medicinal means *aperients*, and of dietetic measures *reduction of carbohydrates*, are a long way the most useful.

Friday, July 26th.—Papers.

ELECTRO-THERAPEUTICS.

President: CHAS. THURSTAN HOLLAND, M.R.C.S., Liverpool.

Vice-Presidents: ALFRED ERNEST BARCLAY, M.A., M.R.C.S., Manchester; DAVID MORGAN, M.B., Liverpool; SAMUEL SLOAN, M.D., F.F.P.S., Glasgow.

Honorary Secretaries: ROBERT KNOX, M.D., 7, Harley Street, London; WALTER CHAS. ORAM, B.A., M.D., Prospect, Allerton Road, Mossley Hill, Liverpool.

The following are the provisional arrangements made:

Wednesday, July 24th.—Address by Professor RUTHERFORD on the Chemical Actions of Radiations. Papers on allied subjects.

Thursday, July 25th.—Discussion of Ionic Medication, to be opened by Dr. LEWIS JONES (London). Papers on Electro-therapeutic subjects.

Friday, July 26th.—Joint discussion, in conjunction with the Section of Anatomy, on the Normal Stomach, to be opened by Dr. A. F. HERTZ (London). Papers on Radiographic and Therapeutic subjects.

In connexion with the Pathological Museum there will be an Exhibition of Radiographs (negatives and prints) of subjects of special interest; also photographs of cases treated by Electro-therapeutic Methods, *X* Rays and Radium, and members desirous of exhibiting are requested to communicate with Dr. Oram.

GYNAECOLOGY AND OBSTETRICS.

President: Professor HENRY BRIGGS, M.B., F.R.C.S., Liverpool.

Vice-Presidents: W. W. CHIPMAN, M.D., Montreal; JOHN EDWARD GEMMELL, M.B., Liverpool; THOS. BABINGTON GRIMSDALE, B.A., M.B., Liverpool; Professor JOHN BENJAMIN HELLIER, M.D., Leeds; MARY HANNAH FRANCES IVENS, M.B., M.S., Liverpool; JOHN FURNEAUX JORDAN, M.B., F.R.C.S., Birmingham.

Honorary Secretaries: ARTHUR JOHN WALLACE, M.D., 1, Gambier Terrace, Liverpool; Assistant Professor DAVID SHANNON, M.B., 270, Bath Street, Glasgow; BETHEL ALBERT HERBERT SOLOMONS, M.B., Rotunda Hospital, Dublin.

The Committee have arranged to hold two discussions:

(*a*) Joint discussion with the Section of Pathology on Eclampsia. To be opened by (1) Dr. J. W. BALLANTYNE (Etiology); (2) Dr. J. H. TEACHER (Morbid Anatomy); (3) Sir WILLIAM SMYLY (Therapeutic Applications of recent research on the subject). Dr. F. W. N. Haultain will take part in the discussion.

The following are abstracts of the opening papers:

1. Dr. J. W. BALLANTYNE: Etiology of eclampsia; the cause and mode of action of the cause; etiology and pathogenesis; pregnancy is the great cause; the breakdown in the intricate symbiosis of gestation; the strain and the stress of it: the labyrinth of pathogenetic theories; "the reason of the cause and the wherefore of the why"; intrauterine causes and extrauterine causes: placental, decidual, fetal, microbic; renal, hepatic, intestinal, thyroidal, parathyroidal, mammary, reflex; the eclamptic type; the etiological significance of albuminuria gravidarum; albuminuria, the "C.D.Q." of symptomatology in eclampsia; other danger signals; the success-in-treatment arguments in etiology, their value and possible fallacies; conclusions.

2. Professor TEACHER: (1) Changes in the liver; a focal necrosis; thrombosis of capillaries; haemorrhages. (2) Changes in the kidneys; cloudy swelling and areas of necrosis and haemorrhage. (3) Changes in other organs. (4) Certain rare cases of eclampsia with suppression of urine due to symmetrical necrosis of the renal cortex.

(*b*) The Results of Treatment of the Inflammatory Diseases of the Uterine Appendages. To be opened by (1) Dr. W. S. A. GRIFFITH (on the Medical Aspects); (2) Mr. CHRISTOPHER MARTIN (on the Surgical Aspects). Professor J. Munro Kerr will take part in the discussion.

In the Pathological Museum a space has been allotted for the exhibition of specimens, microscopic slides, photographs, etc., relating to the Inflammatory Diseases of the Uterine Appendages, and also to Sarcoma of the Uterus. The Committee also invite other specimens of interest, notably those relating to Hydrocephalus, etc.

LARYNGOLOGY AND RHINOLOGY.

President: JOHN MIDDLEMASS HUNT, M.B., Liverpool.

Vice-Presidents: JOHN BARK, F.R.C.S.E., Liverpool; CHAS. EDWARD BEAN, F.R.C.S.E., Plymouth; JAMES EDLINGTON MCDOUGALL, M.B., Liverpool; WM. PERMEWAN, M.D., F.R.C.S., Liverpool; ROBT. HY. WOODS, B.A., M.B., F.R.C.S.I., Dublin.

Honorary Secretaries: THOMAS GUTHRIE, M.A., M.B., F.R.C.S., 55, Rodney Street, Liverpool; GEOFFREY SECCOMBE HETT, M.B., F.R.C.S., 8, Wimpole Street, London, W.

The following subjects have been selected for specia discussion:

Wednesday, July 24th, 10 a.m.—Discussion: The Differential Diagnosis of Oesophageal Stenoses.

Thursday, July 25th, 10 a.m. (together with the Section of Otology).—Discussion: The Education of the Specialist in Laryngology and Otology.

Friday, July 26th, 10 a.m.—Discussion: The Treatment of Chronic Suppurative Disease of the Ethmoidal Sinuses.

Foreign and Colonial visitors are cordially invited to attend the meetings of the Section, and to take part in the discussions. Members are invited to contribute any preparations, specimens, or drawings, or any instruments or apparatus pertaining to the work of the Section, which have been designed by themselves, in order that the Committee of the Section may make arrangements to form a special exhibit of such objects. The Committee ask particularly for pathological specimens, drawings, and radiograms illustrating diseases of the oesophagus, including foreign bodies, also for instruments for the diagnosis and treatment of such diseases.

MEDICAL SOCIOLOGY.

President: JOHN CHRISTIE MCVAIL, M.D., LL.D., Glasgow.

Vice-Presidents: THOMAS BUSHBY, M.B., Liverpool; MICHAEL DEWAR, M.D., Edinburgh; HENRY HARVEY, M.B., Liverpool; ROBERT WALLACE HENRY, B.A., M.D., Leicester.

Honorary Secretaries: ARCHIBALD GORDON GULLAN, M.D., M.R.C.P., 37, Rodney Street, Liverpool; JAMES HENRY TAYLOR, M.B., 299, Eccles New Road, Salford.

The following discussions have been arranged:

Wednesday, July 24th.—(1) A Public Medical Service under Professional Control. (2) *Short discussion, limited to one hour:* Reform of Hospital Out-patient Departments.

Thursday, July 25th.—(1) Administrative Measures Consequent upon the Compulsory Notification of Phthisis. (It is suggested that this meeting be a combined one with that of the Section of State Medicine.) (2) *Short discussion, limited to one hour:* The Control of Venereal Disease.

Friday, July 26th.—(1) Payment of Medical Services by Capitation *versus* Payment per Attendance under the National Insurance Act. (2) *Short discussion, limited to one hour:* Administrative Provisions for the Prevention of Malingering.

MEDICINE.

President: Professor THOMAS ROBINSON GLYNN, M.D., F.R.C.P., Liverpool.

Vice-Presidents: THOMAS ROBERT BRADSHAW, M.D., F.R.C.P., Liverpool; Professor JOHN MICHELL CLARKE, M.A., M.D., F.R.C.P., Clifton, Bristol; SAMUEL HERBERT HABERSHON, M.A., M.D., F.R.C.P., London, W.; JOHN LLOYD ROBERTS, B.A., B.Sc., M.D., Liverpool.

Honorary Secretaries: JOHN OWEN, M.D., 13, Rodney Street, Liverpool; THEODORE THOMPSON, M.D., F.R.C.P., 94, Portland Place, London, W.; WALTER HENRY MAXWELL TELLING, M.D., 29, Park Square, Leeds.

The following programme has been arranged:

Wednesday, July 24th.—Discussion on The Diagnosis and Treatment of Early Cardiac Complications of Rheumatism. To be opened by Dr. DAVID B. LEES (London). The following is an abstract of the opening paper:

(1) "Acute and subacute rheumatism" is a microbic infection, most common and most virulent in childhood, less frequent and usually less virulent in adolescents and young adults. (2) There is but one symptom which is present in every case of the disease. Arthritis, nodules, endocarditis, pericarditis, pleurisy, tonsillitis, erythema, chorea, and all other rheumatic symptoms may be present or absent, but *dilatation of the left ventricle is invariably present.* This dilatation is caused by toxaemia or myocarditis or both combined, and it is a very early symptom. (3) The dilatation can be easily detected by careful percussion rightly performed. It is quite easy to determine accurately the sloping line of dullness of the edge of the left ventricle in the fourth and fifth left interspaces, and that of the right auricle in the fourth right interspace. (4) The first essential for the successful treatment of the cardiac implication of rheumatism is prolonged rest. (5) The second essential is an adequate antirheumatic medication, the most useful form of this being a combination of sodium salicylate and sodium bicarbonate in the proportion of one part of the former to two of the latter, given in adequate and increasing doses. (6) During the treatment by salicylate it is necessary (*a*) to prevent constipation, (*b*) to keep the urine slightly alkaline, (*c*) to stop the medicine when vomiting or other symptom due to salicylate occurs, but to *resume it after a few hours in a dose one-half the size of the dose last given,* and soon to increase the amount as far as possible. (7) When the dilatation (with or without endocarditis) is great, and especially when pericarditis is present, the medicine should be freely given, and an ice-bag should be kept permanently over the precordial region, with due precautions against general chill. Careful nursing is essential. The application of leeches is sometimes beneficial.

Thursday, July 25th.—Discussion on The Pathogenesis, Diagnosis, and Medical Treatment of Gastric Ulcer. To be opened by Sir BERTRAND DAWSON (London).

Friday, July 26th.—Papers.

NAVY, ARMY, AND AMBULANCE.

President: Colonel DAMER HARRISSON, K.H.S., M.Ch., F.R.C.S.E., Liverpool.

Vice-Presidents: Colonel GUY CARLETON JONES, M.D., Director-General of Medical Services Militia of Canada, Department of Militia and Defence, Militia Head Quarters, Ottawa; Surgeon-General WILLIAM BABTIE, V.C., C.M.G., M.B., L.R.C.P., Deputy Director-General, Army Medical Service, War Office, S.W.; Lieutenant-Colonel NATHANIEL EDWARD ROBERTS, M.B., D.P.H., Liverpool; Fleet Surgeon GEORGE TREVOR COLLINGWOOD, M.V.O., R.N., Royal Naval College, Osborne, Isle of Wight.

Honorary Secretaries: Captain JOHN HENRY PORTEOUS GRAHAM, M.R.C.S., L.R.C.P., 20, Fenwick Street, Liverpool; Lieutenant-Colonel NATHAN RAW, M.D., F.R.S.E., 66, Rodney Street, Liverpool.

The following preliminary programme has been arranged:

Wednesday, July 24th.—Factors affecting the Marching Powers of Troops. To be opened by Captain DUNBAR-WALKER, R.A.M.C.

Thursday, July 25th.—Eyestrain: its Relation to Gunnery. To be opened by Fleet Surgeon WHITELEGGE, R.N.

Papers:

WILDEY, Fleet Surgeon A. G., R.N.: A Suggestion for the More General Use of Iodine in First Aid Treatment of Accidental Wounds.

JONES, Colonel Guy Carleton: The Importance of Medical Tactics.

NEUROLOGY AND PSYCHOLOGICAL MEDICINE.

President: LANDEL ROSE OSWALD, M.B., Glasgow Royal Asylum, Gartnavel, Glasgow.

Vice-Presidents: WILLIAM ALEXANDER, M.D., F.R.C.S., Liverpool; FREDERICK EUSTACE BATTEN, M.D., F.R.C.P., London, W.; DAVID BLAIR, M.D., County Asylum, Lancaster; ERNEST SEPTIMUS REYNOLDS, M.D., F.R.C.P., Manchester.

Honorary Secretaries: WILLIAM BARNETT WARRINGTON, M.D., F.R.C.P., 63, Rodney Street, Liverpool; HENRY DEVINE, M.D., West Riding Asylum, Wakefield; PURVES STEWART, M.A., M.D., F.R.C.P., 94, Harley Street, London, W.

The following subjects have been selected for special discussion:

Wednesday, July 24th.—The Neuroses and Psychoses of the Climacteric: their Prognosis and Treatment. To be opened by Dr. R. PERCY SMITH, Dr. C. J. MACALISTER, and Dr. T. B. GRIMSDALE, from the standpoint respectively of Psychiatrist, General Physician, and Gynaecologist.

Thursday, July 25th.—Diagnosis and Treatment of Compression Paraplegia. To be opened by Dr. ERNEST REYNOLDS and Sir VICTOR HORSLEY.

Foreign and Colonial visitors are cordially invited to attend the meetings of the Section, and should they desire to read papers they are requested to send in their names as soon as possible to one of the Honorary Secretaries, giving the titles of their papers for approval by the Committee of Reference.

Members are invited to contribute any preparations, specimens or drawings, or any instruments or apparatus pertaining to the work of the Section, which have been designed by themselves, in order that the Committee of the Section may make arrangements to form a special exhibit of such objects.

OPHTHALMOLOGY.

President: EDGAR ATHELSTANE BROWNE, M.Ch., F.R.C.S. Eng., Liverpool.

Vice-Presidents: CHARLES GEORGE LEE, M.R.C.S., Liverpool; ALEXANDER OGILVY, F.R.C.S.Ire., Clifton, Bristol; ANDREW MAITLAND RAMSAY, M.D., F.F.P.S., Glasgow; CHARLES HARTLEY BEDWELL SHEARS, M.R.C.S., Liverpool.

Honorary Secretaries: ARTHUR NIMMO WALKER, B.A., M.D., 45, Rodney Street, Liverpool; ROBERT JESSOP HAMILTON, F.R.C.S.Eng., 82, Rodney Street, Liverpool; CLAUDE ALLEY WORTH, F.R.C.S., 138, Harley Street, London, W.

The following subjects have been selected for discussion:

Wednesday, July 24th.—Irido-cyclitis (special reference to pathology). Mr. G. COATS; Mr. A. W. ORMOND.

The following is a synopsis of Mr. COATS's paper:

The part played by the intestinal canal in the causation of chronic irido-cyclitis will be discussed. A fallacy to be guarded against lies in the great prevalence of constipation and intestinal putrefaction, which would make their association with irido-cyclitis in a certain number of cases not surprising, even though in fact no connexion between the two existed. Cases in which no evidence of any intestinal abnormality or other probable source of infection is discoverable undoubtedly occur. The views of Elschnig, de Schweinitz, and v. Hippel on auto-intoxication will be summarized, and the value of the indican reaction as a test of intestinal putrefaction will be reviewed. The very chronic form of irido-cyclitis which is associated with heterochromia and cataract will be mentioned. Fuchs believes that in these cases some unknown cause first hinders the normal acquisition of pigment in the eye, and then, in later life, gives rise to the irido-cyclitis. The opinion of members will be sought as to whether it is not more probable that the cyclitis is the primary disease, the heterochromia being a secondary phenomenon due to a gradual bleaching of the iris in consequence of the inflammation. It is probably agreed that the cataract is secondary. Some points in connexion with the pathology of sympathetic ophthalmitis will be raised. Price Jones and Browning have stated that the large mononuclear cells of the blood are increased in this disease, and that this may point to its being due to a protozoal infection. The incubation period also is not unlike that of the protozoal disease,

syphilis, and the occasional faculty which the noxa of sympathetic irido-cyclitis possesses of remaining latent over a prolonged period and then breaking out into activity, suggests an analogy with the similar latency and recrudescence of the *Spirochaeta pallida* in the tertiary stages of syphilis. On these grounds the administration of salvarsan has been suggested. The experience of members on this method of treatment will be asked, and three cases in which it was carried out will be referred to. The views of Elschnig on the relation of anaphylaxis to sympathetic irido-cyclitis will be submitted to a brief examination. Discussion will be invited on the question how far the histological changes which are usually regarded as characteristic of sympathetic irido-cyclitis are, in fact, diagnostic of that affection, whether they occur only in this disease and in all cases of it. Two examples of a very mild type of sympathetic irido-cyclitis will be quoted, not cases in which, after a threatening onset, the final result was good, but in which from first to last the symptoms in the second eye were trifling. Reports of similar cases would be welcomed.

Thursday, July 25th.—Tuberculin and Serum Therapy. Mr. GEORGE MACKAY; Dr. HILL GRIFFITH; Mr. PEEL RITCHIE.

Friday, July 26th.—Salvarsan. Mr. S. STEPHENSON; Dr. MAITLAND RAMSAY, and Mr. S. H. BROWNING.

Foreign and Colonial visitors are cordially invited to attend the meetings of the Section.

Members are invited to contribute any cases, preparations, specimens of drawings, or any instruments or apparatus pertaining to the work of the Section, which have been designed by themselves, in order that the Committee of the Section may make arrangements to form a special exhibit of such objects.

OTOLOGY.

President: HUGH EDWARD JONES, M.R.C.S., Liverpool.

Vice-Presidents: ARTHUR HENRY CHEATLE, F.R.C.S., London, W.; JAMES KERR LOVE, M.D., Glasgow; PERCIVAL MACLEOD YEARSLEY, F.R.C.S., London, W.; HENRY HANNA, M.A., M.B., Belfast.

Honorary Secretaries: ERNEST MALCOLM STOCKDALE, M.R.C.S., 67, Rodney Street, Liverpool; W. MAYHEW MOLLISON, M.A., M.C., F.R.C.S., Warden's House, Guy's Hospital, London, S.E.; DAVID LINDLEY SEWELL, M.B., B.S., 2, Peter's Square, Manchester.

The following subjects have been selected for special discussion:

Wednesday, July 24th, 10 a.m. — Discussion: Acute Middle-ear Suppuration, its Neglect and Proper Treatment. To be opened by Mr. R. H. WOODS (Dublin); followed by Professor Gustav Alexander (Vienna) and Dr. Claude Rundle (Medical Superintendent, City Hospital, Fazerkelly).

It is hoped that medical officers of fever hospitals and schools will attend this discussion, which is of special interest to them. The following are abstracts of the opening papers:

Mr. R. H. WOODS: Otitis media. Definition. Not an abscess, but inflammation of a mucous tract. Predisposing causes. Pathological conditions in throat and nose. Determining causes. Mechanical ones, particularly nasal douche. Degrees of severity due to microbe and patient. Clinical course in all essentially the same. Physical conditions during progress. Accompanying symptoms. Character of fluid at first and subsequently. Acute and chronic cases. Fundamental difference between them a bacterial one. Keynote of treatment of acute cases is cleanliness. Neglect of acute otitis still great, even in the case of specific fevers. Summary of results obtained by investigating over 300 cases of measles and scarlatina in the Hardwicke Hospital in 1896. Method of treatment of ears in fevers. Treatment of acute otitis. Myringotomy. Course to be followed when symptoms are unrelieved by that procedure. Cerebral irritation in children. Need for better education of clinical physicians and medical students.

Dr. CLAUDE RUNDLE: Percentage incidence in cases of scarlet fever, measles, and diphtheria. Frequency of spontaneous cure. Can otitis be prevented by the removal of post-nasal obstruction during the acute stage of the exanthemata? Intratympanic medication by either route of little value. Removal of tonsils or adenoids an unsafe procedure during the course of acute suppurative otitis media complicating the fevers. Paracentesis not often necessary. Mastoid abscess not a common complication of this condition. Antrotomy occasionally required. Radical mastoid operation probably never justifiable in uncomplicated cases of acute suppurative otitis media. Serum and vaccine therapy.

Thursday, July 25th, 10 a.m.—Joint Discussion with the Section of Laryngology on the Education of the Specialist in Laryngology and Otology. To be opened by Dr. P. WATSON-WILLIAMS.

Foreign and Colonial visitors are cordially invited to attend the meetings of the Section, and should they desire to read papers they are requested to send in their names as soon as possible to the Liverpool Honorary Secretary, giving the titles of their papers for approval by the Committee of Reference.

Members are invited to contribute any preparations, specimens of drawings, or any instruments or apparatus pertaining to the work of the Section, which have been designed by themselves, in order that the Committee of the Section may make arrangements to form a special exhibit of such objects.

PATHOLOGY.

President: Professor WALKER HALL, M.D., The University, Bristol.

Vice-Presidents: ARTHUR EDWIN BOYCOTT, M.A., B.Sc., M.D., London; Professor GEORGE DEAN, M.B., The University, Aberdeen; Associate Professor ERNEST EDWARD GLYNN, M.A., M.D., Liverpool; THOS. STRANGEWAYS PIGG STRANGEWAYS, M.A., L.R.C.P., Cambridge.

Honorary Secretaries: DAVID MOORE ALEXANDER, M.D., School of Hygiene, The University, Liverpool; PANTLAND HICK, M.D., 21, Rodney Street, Liverpool; JAS. SHOLTO CAMERON DOUGLAS, M.B., Department of Pathology, University, Birmingham.

The following provisional programme has been arranged:

Wednesday, July 24th.—Discussion on Bright's Disease. Professor J. LORRAIN SMITH, F.R.S., will open the discussion with a paper on the morbid anatomy and etiology. Sir CLIFFORD ALLBUTT will deal with the cardiovascular changes; followed by Professor J. SIMS WOODHEAD, Dr. W. RUSSELL, and Dr. J. F. GASKELL. Dr. F. CRAVEN MOORE will read a paper on the Liver and Metabolic Changes.

Thursday, July 25th.—Joint discussion with the Gynaecological and Obstetrical Section on Eclampsia. To be opened by Dr. JOHN W. BALLANTYNE in a paper on the etiology of the disease; followed by Dr. JOHN H. TEACHER, on the morbid anatomy; and by Sir WILLIAM SMYLY, on the clinical application of recent research to treatment.

Friday, July 26th.—The following papers on pathological subjects will be read:

HORDER, Dr. T. J. The Investigation of Puncture Fluids as an Aid to Diagnosis and Treatment.
BOLTON, Dr. C. The Causation of Gastric Ulcer.
MACCLEAN, Dr. H. Some Fallacies in the Routine Testing of Urines.
BARNES, Dr. A. G. Chemical Examination of Faeces in Actual Practice.
WILLIAMS, Dr. O. T. Excretory Functions of the Intestines and their Relations to Disease.
GLYNN, Associate Professor E. Blood Cultures in Disease.

PHARMACOLOGY AND THERAPEUTICS.

President: Professor W. E. DIXON, M.A., M.D., Cambridge.

Vice-Presidents: Professor JOHN HILL ABRAM, M.D., Liverpool: Professor ROBERT JAMES MCLEAN BUCHANAN, M.D., Liverpool; Professor HY. JOHNSTONE CAMPBELL, M.D., Bradford; HUGH JONES ROBERTS, M.D., Pen-y-groes, N. Wales.

Honorary Secretaries: OWEN THOMAS WILLIAMS, M.D., 51a, Rodney Street, Liverpool; Assistant Professor FRANCIS JAS. CHARTERIS, M.B., 400, Great Western Road, Glasgow; Professor JOHN DUNDON, M.D., F.R.C.S., 3, Camden Place, Cork.

The following subjects have been selected for discussion:

1. The Treatment of Heart Muscle Affections (apart from Valvular Disease).
2. The Rôle of Calcium Salts as Therapeutic Agents.

3. Joint Discussion with the Section of Bacteriology on Vaccine Therapy.

PHYSIOLOGY.

President: Professor JNO. SMYTH MACDONALD, B.A., L.R.C.P., Sheffield.

Vice-Presidents: Professor ARCHIBALD B. MACALLUM, F.R.S., Toronto; Professor BENJAMIN MOORE, D.Sc., M.R.C.S., Birkenhead; HORACE MIDDLETON VERNON, M.D., Oxford.

Honorary Secretaries: JOHN ALEX. MILROY, M.A., M.D., Queen's College, Belfast; THOMAS GRAHAM BROWN, B.Sc., M.B., The University, Liverpool; FREDK. PERERA WILSON, M.Sc., M.D., 1A, Rodney Street, Liverpool.

STATE MEDICINE AND INDUSTRIAL DISEASES.

President: ARCHIBALD KERR CHALMERS, M.D., Glasgow.

Vice-Presidents: ALLAN GORDON RUSSELL CAMERON, M.B., B.S., D.P.H., Worthing; EDWARD WM. HOPE, D.Sc., M.D., Liverpool; SYDNEY MARSDEN, M.B., D.P.H., D.Sc., M.R.I.A., F.R.S.E., Birkenhead; ARTHUR AUGUSTUS MUSSEN, B.A., M.D., D.P.H., Liverpool; MATTHEW JAMES OLIVER, M.B., D.P.H., Roxburghshire.

Honorary Secretaries: THOS. WM. NAYLOR BARLOW, M.R.C.S., D.P.H., Public Health Office, Wallasey, Cheshire; JOHN JAMES BUCHAN, M.D., D.P.H., Holly Mount, Laurel Road, St. Helens; HARRY LLEWELLYN HEATH, L.M.S.S.A., D.P.H., 65, Fonnereau Road, Ipswich.

The following subjects have been suggested for discussion:

1. Compulsory Notification of Phthisis: Administrative Measures Consequent Upon.
2. The Need for Popular Education in Public Hygiene.
3. The Effect of Preventive Measures upon Infant Mortality.
4. Recent Legislation Affecting Town Planning and Housing: (*a*) New Areas; (*b*) Reconstruction of Old Areas; (*c*) Standards of Insanitation.
5. Food Inspection (including the Use of Preservatives). Directions in which the Efficiency of Food Inspection may be Improved.
6. School Construction and Medical Inspection of School Children.
7. Industrial Diseases and their Prevention.

SURGERY.

President: Professor RUSHTON PARKER, M.B., B.S., F.R.C.S., Liverpool.

Vice-Presidents: HAMILTON ASHLEY BALLANCE, M.S., F.R.C.S., Norwich; ROBERT A. BICKERSTETH, M.A., M.B., F.R.C.S., Liverpool; FREDERIC CHARLES LARKIN, F.R.C.S., Liverpool; ALBERT LUCAS, F.R.C.S., Birmingham; HAROLD JALLAND STILES, M.B., F.R.C.S.E., Edinburgh.

Honorary Secretaries: ROBERT WM. MURRAY, F.R.C.S. 15, Rodney Street, Liverpool; GEO. PALMERSTON NEWBOLT, M.B., B.S., F.R.C.S., 5, Gambier Terrace, Liverpool; ALEX. WATHEN NUTHALL, Ch.M., F.R.C.S., 3, Calthorpe Road, Edgbaston, Birmingham.

The following subjects have been selected for discussion:

1. The Treatment of Carcinoma of the Rectum, to be opened by Mr. HARRISON CRIPPS, London.
2. The Diagnosis and Treatment of Tuberculous Disease of the Urinary Tract, to be opened by Mr. HURRY FENWICK, London.

TROPICAL MEDICINE.

President: Professor JOHN L. TODD, M.D., McGill University, Montreal.

Vice-Presidents: Fleet Surgeon P. W. BASSETT-SMITH, C.B., R.N., Royal Naval Hospital, Haslar; WM. CARNEGIE BROWN, M.D., M.R.C.P., London; WILLIAM THOMAS PROUT, M.B., C.M.G., Liverpool; JNO. WM. WATSON STEPHENS, B.A., M.D., School of Tropical Medicine, Liverpool; ALBERT JOHN CHALMERS, M.D., F.R.C.S., London.

Honorary Secretaries: BREADALBANE BLACKLOCK, M.B., Runcorn Research Laboratories, Crofton Lodge, Runcorn; HUGH BASIL GREAVES NEWHAM, M.R.C.S., Director, London School of Tropical Medicine, Albert Dock, London, E.

The following subjects have been selected for discussion:

Wednesday, July 24th, 10 a.m.—1. Human Trypanosomiasis; (*a*) The Question of the Specificity of the Trypanosomes affecting Human Beings; (*b*) The Methods of, and Agents Concerned in, the Transmission of the Trypanosomes affecting Man. 2. Verminous Toxins in Man and Animals.

Thursday, July 25th, 10 a.m.—1. Leprosy. 2. Leishmaniasis.

Friday, July 26th, 10 a.m.—Sanitation of Agricultural Estates where Large Labour Forces are Employed in the Tropics.

A special subsection of the Museum is being reserved for exhibits in Tropical Medicine, and the Curator of the Museum, or the Subcurator of the Tropical Section, will be glad to receive photographs, pathological specimens, etc. Preparations, with full descriptive labels, illustrative of the conditions of "Leprosy" and "Leishmaniasis," would be of especial service for demonstration.

Honorary Local Treasurer—
THOMAS H. BICKERTON, M.R.C.S.,
88, Rodney Street, Liverpool.

Honorary Local Secretaries—
FRANK H. BARENDT, M.D., F.R.C.S.Eng.,
KARL A. GROSSMANN, M.D., F.R.C.S.Edin.,
W. THELWALL THOMAS, Ch.M., F.R.C.S.,
Liverpool Medical Institution, 114, Mount Pleasant, Liverpool.

PROVISIONAL PROGRAMME.

The following is the provisional time table for the Liverpool Meeting:

FRIDAY, JULY 19TH, 1912.
10 a.m.—Annual Representative Meeting.

SATURDAY, JULY 20TH.
9.30 a.m.—Representative Meeting.

MONDAY, JULY 22ND.
9.30 a.m.—Council Meeting.
10 a.m.—Representative Meeting.
7 p.m.—Secretaries' Conference and Dinner.

TUESDAY, JULY 23RD.
9.30 a.m.—Representative Meeting.
2 p.m.—Annual General Meeting.
8.30 p.m.—Adjourned General Meeting, President's Address.

WEDNESDAY, JULY 24TH.
9 a.m.—Council Meeting.
10 a.m. to 1 p.m.—Sectional Meetings.
12.30 p.m.—Address in Medicine.
Religious Services—
9.0 a.m.—Roman Catholic service at the Pro-Cathedral, Copperas Hill.
3.0 p.m.—Protestant Service at St. Luke's Church.

THURSDAY, JULY 25TH.
10 a.m. to 1 p.m.—Sectional Meetings.
12.30 p.m.—Address in Surgery.
7.30 p.m.—Annual Dinner.

FRIDAY, JULY 26TH.
9 a.m.—Council Meeting.
10 a.m. to 1 p.m.—Sectional Meetings.

SATURDAY, JULY 27TH.
Excursions.

Members are invited to wear academic costume at the following functions: The President's Address on Tuesday evening, July 23rd; the Roman Catholic Service at the Pro-Cathedral on Wednesday morning, July 24th; the Church Service at St. Luke's in the afternoon; and the Lord Mayor's reception at the Town Hall in the evening of the same day, and also at the *soirée* at the Walker Art Gallery on Friday evening, July 26th.

LIVERPOOL MEETING, 1912.

JULY 23rd, 24th, 25th, and 26th.

NOTIFICATION OF ATTENDANCE.

All Members of the Association, including residents in **LIVERPOOL** and **DISTRICT,** who intend to take part in the **Annual Meeting,** are earnestly requested to fill up and post this form as soon as possible.

Early intimation will greatly facilitate the arrangements for official entertainments as well as for private hospitality.

On receipt of this form a voucher will be sent enabling the member and those accompanying him to obtain Railway Tickets at reduced fares.

Notices on matters of interest to those attending the Meeting will appear from time to time in the *Supplement to the Journal.* Particulars of Hotels and Lodgings are given overleaf.

It is my intention to be present at the ANNUAL MEETING in LIVERPOOL and

Please write distinctly.

*I expect to be accompanied by** _____

Name _____

Address _____

*Here indicate whether accompanied by a lady, as separate Railway vouchers are required for each person. The Ladies' Entertainmen Committee will be glad to have early intimation of the *names* of ladies accompanying members to the Meeting.

THE ANNUAL DINNER.

The Annual Dinner of the Association will take place on THURSDAY EVENING, July 25th, at the PHILHARMONIC HALL, LIVERPOOL, at 7.30 o'clock. The cost of each Dinner Ticket (exclusive of Wine) is 10s. 6d.

Early application for Tickets is requested.

Please reserve a seat for me at the Dinner for which I enclose a remittance of 10s. 6d.

Signature _____

Cheques should be made payable to Dr. CHARLES HILL, and this form when filled up, posted to Dr. BLAIR-BELL, 7, Rodney Street, Liverpool.

[*See next page.*

LIVERPOOL MEETING, 1912.

July 18th to 26th.

Members intending to attend at the Annual Meeting are earnestly invited to secure their required accommodation at once. The Wesleyan Conference is being held in Liverpool at the same time as the Annual Meeting, also there is a large influx of American visitors, and a race meeting at Aintree. Hence, in order that no one should be disappointed it is hoped that Members will secure their accommodation now.

Any further information about Hotels or Lodgings will be gladly given on application to

A. STANLEY PARKINSON, M.D.,
24, High Street, Wavertree, Liverpool.

Penny Stamp.

Dr. BLAIR BELL,
7, Rodney Street,
Liverpool.

LIVERPOOL MEETING, July, 1912.—List of Hotels.

HOTELS.	Number of available Beds.	Tariff.
ADELPHI HOTEL, Lime Street	400 beds	Bed and breakfast 8/- per day Inclusive 14/6 per person per day
NORTH-WESTERN HOTEL, Lime Street Station	300 beds	Inclusive 12/6 per person per day
EXCHANGE STATION HOTEL, Liverpool	150 beds	Single beds 5/-, double bed 9/6 for two persons Single bed and breakfast 7/6 Double bed and breakfast 14/6 Table d'Hote luncheon 3/- Table d'Hote dinner 5/- Inclusive terms per day, bed, breakfast, luncheon, dinner 12/6
COMPTON HOTEL, Church Street	30 single bedrooms 20 double bedrooms	Bed and breakfast 6/6 each person Table d'Hote lunch 2/6 each person. Table d'Hote dinner 3/6 Inclusive 12/6 per day. 10/- per day without lunch
SHAFTESBURY HOTEL, Mount Pleasant (Temperance)	15 single bedrooms 10 double bedrooms	Bed and breakfast single room 5/- Bed and breakfast double room 9/6 Hot luncheon 2/- Dinner (Table d'Hote) 2/6 Inclusive 8/6 per day
LAURENCE'S HOTEL. Clayton Square (Temperance)		Single beds 3/3. Double bed 5/6 Breakfasts 1/6, 2/6. Luncheon 1/6, 2/6 Teas 1/6, 2/6 Inclusive 8/6 per day.
HUNT'S HOTEL, 52, Mount Pleasant, Liverpool (Temperance)	42 beds	Bed and breakfast 4/6 single Bed and breakfast 9/- double Luncheon 1/6, 2/- Dinner 2/6 Inclusive 8/- per day.
HOTEL ST. GEORGE, Lime Street, Liverpool	100 beds	Bed and breakfast, single, 6/6 Bed and breakfast, double, 12/6 Luncheons 1/6, 2/6 Dinner 2/6 10/- per day for not less than one week
CLIFTON COMMERCIAL HOTEL, 41, Islington, Liverpool	30 beds	Bed and breakfast, single, 4/6 Double 8/-. Luncheon 1/6 Inclusive terms per day 8/- each Double 7/6 each
UNION HOTEL, Clayton Square, Liverpool	15 beds	Bed and breakfast, single, 6/- Double 10/- Luncheon 2/6. Dinner 3/6 Inclusive terms per day 10/6
HOTELS AWAY FROM CENTRE OF LIVERPOOL.		
HOTEL ROYAL, Waterloo, Liverpool		Bed and breakfast 5/6 per day Inclusive 8/- per day
WOOLTON HALL HYDRO, near Liverpool	10 single bedrooms 40 double bedrooms	Bed and breakfast for single room 5/- Bed and breakfast for double room 10/- Luncheon 1/6. Dinner (table d'Hote), 2/6. Inclusive per day 7/6

HOTELS.	Number of available Beds.	Tariff.
HOTELS AWAY FROM CENTRE OF LIVERPOOL.		
CHILDWALL ABBEY HOTEL, Childwall	5 single bedrooms 3 double bedrooms	Bed and breakfast 6/6 per day Bed (double) and breakfast for two 12/6 per day Table d'Hote dinner, 3/6 each
THE GROVE HOTEL, Wallasey, (Cheshire) Temperance	12 beds	Bed and breakfast 4/- Board and lodgings 6/6 per day
VICTORIA HOTEL, New Brighton	50 beds	Bedroom and attendance 4/- each. Breakfast 2/6 Dinner 4/-. Lunch 2/6 Inclusive terms 12/- per day
ROYAL FERRY HOTEL, New Brighton	14 beds	Bed and breakfast 5/- Inclusive terms per day 7/6
THE MARINE HOTEL, Promenade, New Brighton	6 beds	Bed and breakfast, single, 5/- double 8/6 Luncheon 2/-. Dinner 2/6 Inclusive terms per day 7/6 Inclusive terms per week 50/-
PRINCE OF WALES HOTEL, Southport	40 single bedrooms 40 double bedrooms	Single bed and breakfast 6/- Double bed and breakfast 11/- Table d'Hote luncheon 2/6 Table d'Hote dinner 4/- Inclusive terms per day 10/-
THE PALACE HOTEL, Southport	40 bedrooms	Single bed 4/- Bed and breakfast 6/6 single Bed and breakfast, double 11/- Luncheon 2/6 Table d'Hote dinner 5/- Inclusive terms 10/6 per day
VICTORIA HOTEL, Southport	30 single bedrooms 15 double bedrooms	Bed and breakfast 5/6 single room Bed and breakfast 5/- double room (each) 2/- luncheon 3/- Table d'Hote dinner 8/- inclusive terms per day
GROSVENOR HOTEL, Chester	Accommodation 100 visitors	Single beds from 5/- Double beds from 8/- Table d'Hote breakfast 3/- Table d'Hote luncheon 3/6 Table d Hote dinner 5/-
QUEEN'S HOTEL, Chester	40 single rooms 20 double rooms	Bed and breakfast, single, 7/6 Bed and breakfast, double, 14/- Luncheon, 2/6. Dinner, 5/- Inclusive, 13/6 per day
ROYAL HOTEL, Hoylake, Cheshire	80 single rooms 5 double rooms	Bed and breakfast, single, 5/6 Bed and breakfast, double, 9/- Luncheon, 2/- Dinner (table d'Hôte), 4/- Inclusive, 10/6 per day
THE HYDRO HOTEL, West Kirby, Cheshire	25 single beds 26 double beds	Bed and breakfast, singe, 5/6 Bed and breakfast, double, 10/6 Luncheon, 2/6 Table d'Hôte dinner, 3/- Inclusive, 8/- & 9/- per day each

Those addresses marked * are on a direct tram route within 10 to 20 minutes from the centre of the City.

WATERLOO AND SOUTHPORT are reached in 15 and 35 minutes respectively by frequent electric trains by the L. and Y. Railway from Exchange Station.

CHESTER is reached in 40 minutes by the Mersey Railway from the Central Station.

WALLASEY AND NEW BRIGHTON have frequent Ferry boat services, and also the Mersey Railway, journey about 15 and 30 minutes respectively.

WEST KIRBY AND HOYLAKE are served by the Mersey and Wirral Railways, journey about 30 minutes.

LIVERPOOL MEETING, July, 1912.—List of Apartments.

Name and Address.	Accommodation.	Tariff.
LIVERPOOL:		
*Miss Chuck, 32, Falkner Square, Liverpool	7 beds	Bed and breakfast 6/-; board and residence 7/- per day
*Mrs Dey, Deysbrook House, 2, Canning Street, Liverpool	—	Bed and breakfast 4/6; board and residence 6/6 to 7/6 per day and from 31/6 per week
Mrs. Scott, Simpson, Atholston House, 11-12, Gambier Terrace, Liverpool	Private Hotel	Bed and breakfast 4/- to 4/6 per day; full board and residence 6/6 to 8/6 per day, 30/- to 42/- per week
Miss Geach, Cathedral View, 5, Canning Street, Liverpool	Boarding Establishment 15 beds	Bed and breakfast 4/6; board and residence 6/6 per day; 31/6 and 42/ per week
*Mrs. Woodworth, 61, Canning Street, Liverpool	4 beds	Bed and breakfast 3/6 per day; board and lodgings 35/- per week
*Mrs. Dimmock, 50, Princes Road, Liverpool	4 beds	Bed and breakfast 4/-; luncheons 1/6; dinner 2/6 to 3/-; full board 30/- per week
*M. Fountaine, 76, Princes Road, Liverpool	Large house	Bed and breakfast 3/6 per day; full board 5/- per day
*Mrs. H. Walker, 57, Croxteth Road, Liverpool	5 beds—3 double, 2 single 3 sitting rooms.	Bed and breakfast 4/6; full board 8/- per day
*Mrs. Pusey, 2, Princes Avenue, Liverpool	6 bedrooms	Bed and breakfast 27/- per week
*Mrs. Haythorne, 27, Princes Avenue, Liverpool	—	Bed and breakfast 5/- to 7/6 per day; full board and residence 35/- to 2½ guineas per week
*Mrs. Nickels, 3, Princes Avenue, Liverpool	—	Bed and breakfast 4/6 per day; board and residence 38/- to 2½ guineas per week
*Mrs. Lobby, 22, St. Domingo Vale, Everton, Liverpool	1 bedroom 1 sittingroom	Bed and breakfast 3/6; board and residence 8/6 per day
*Mrs. M. E. William, 39, Mulgrave Street, Princes Avenue, Liverpool	2 double beds 3 single beds 1 sitting room	Bed and breakfast, 3/-; full board and lodging 25/-
*Mrs. A. H. Palmer, 36, Mulgrave Street, Princes Road, Liverpool	3 beds 1 sitting room	Bed and breakfast, 17/- per week
*Mrs. Toner, 72, Mulgrave Street, Princes Park, Liverpool	3 double beds 1 single bed	Bed and breakfast, 3/-; bed and breakfast and late dinner, 4/-; apartments with full board, 5/-
*Mrs. Isabella Carran, Glossina House, 44, Upp. Parliament Street, Liverpool	8 beds 2 sitting rooms	Bed and breakfast, 3/6 per day; full board and residence from 5/6
*Mrs. N. Williams, 56, Upp. Parliament Street, Liverpool	8 bedrooms	Bed and breakfast, 3/6 per day; board and lodging, 5/- per day; 30/- per week
*Mrs. Ames, 185, Upp. Parliament Street, Liverpool	1 double bed 1 single bed 1 sitting room	Bed and breakfast, 3/6; full board per week, 42/-
*Mrs. Norris, 55, Upp. Parliament Street, Liverpool	4 beds	Bed and breakfast (double), 3/- each per day; bed and breakfast (single), 3/6 per day; board and lodgings, partial, 5/-; full, 6/- per day.
*Miss Hutchinson, 17, Verulam Street, Upp. Parliament Street, Liverpool	2 bedrooms 2 sitting rooms	Bed and breakfast, 3/-; bed and full board, 23/- to 25/-
*Mrs. Cowap, 117, Cumberland Terrace, Upper Parliament Street, Liverpool	2 bedrooms 1 sitting room	Bed, breakfast and meat tea 6/- per day; bed and breakfast 4/-
Miss A. Tasker, 144, Bedford Street, S., Liverpool	Private boarding house, 5 beds	Bed and breakfast 4/- per day; (full board 5/-, 8/- per day, and lodging 28/- to 50/- per week)
Mrs. B. Clarkson, 154, Bedford Street, S., Liverpool	3 beds	Bed and breakfast 5/- per day; board and rooms 10/- per day
LIVERPOOL:		
J. Collishaw, 160, Bedford Street, Liverpool	2 bedrooms 1 sitting room	Bed and breakfast 3/- per day; full board and lodging 25/- each
*Miss E. Ray, 25, Huskisson Street, Liverpool	3 beds	Bed and breakfast 3/6 per day; full board and lodging 27/- per week
Mrs. Furlong, 50, Huskisson Street, Grove Street, Liverpool	6 beds	Bed and breakfast 3/-; luncheon 1/-; dinner 1/3
Mrs. E. Nicholas, 67, Grove Street, Liverpool	3 beds Dining room Sitting room	Bed and breakfast 5/-; board residence for a week 4/- per day
*Mrs. Broach, Claremont House, 179, Grove Street, Falkner Square, Liverpool	4 beds	Bed and breakfast 3/- per day; bed and full board 26/6 per week
*Mrs. T. Bound, Cintra, 145, Granby Street, Princes Park, Liverpool	4 bedrooms	Bed and breakfast 3/6 to 4/6; full board and lodging 22/- to 25/-
Mrs. M. Beaumont, 14, Welfield Place, Princes Park, Liverpool	3 double beds 3 single beds	Bed and breakfast 3/- per day; bed and breakfast and late dinner 4/-; bed and breakfast and full board 5/-
Mrs. M. Smith, 40, Jermyn Street, Princes Park, Liverpool	2 bedrooms 1 sitting room	Bed and breakfast 4/6 per day; board and lodgings £2 2s. 0d. per week
*Mrs. S. A. Stewart, 39, Shaw Street, Liverpool	4 beds 2 sitting rooms	Bed and breakfast 3/6 per day; board and residence 25/- per week
*Mrs. A. Caspari, 23, Sefton Park Road, Liverpool	1 bed	Bed and breakfast 20/- per week; bed and breakfast and dinner 30/- per week; lunch 1/- per day extra
Mrs. Lewis, 48, Thackeray Street, Princes Road, Liverpool	3 beds 2 sitting rooms	Bed and breakfast 2/6 per day; board and lodging 26/- per week
*Mrs. Jones, 24, Kelvin Grove, Liverpool	3 beds 2 sitting rooms	Bed and breakfast 3/6 per day; board and lodgings 30/- per week
*Miss A. Creighton, 21, Kelvin Grove, Princes Gate West, Liverpool	2 beds	Bed and breakfast 4/-; board and lodging, breakfast, high tea and light supper 24/- per week
Mrs. J. Anderson, 21, Oxford Street, Mount Pleasant, Liverpool	3 beds 1 sitting room	Bed and breakfast 3/- single; bed and breakfast 4/6 for two; board and lodging for 9 days £1 6/-
Mrs. Whitelaw, 75, Oxford Street, Liverpool	5 beds	Bed, breakfast 2/6, 3/-; £1 1/- per week; full board and residence
*Mrs. W. Sutton, 8, Edge Lane, Liverpool	2 bedrooms 1 sitting room	Bed and breakfast 3/- per day; board and lodgings 30/- for 9 days
*Mr. M. Thomas, 26, Hartington Road, Sefton Park, Liverpool	3 beds	Bed and breakfast 3/6 per day
*Mrs. M. E. Askinstall, 94, Russell Road, Sefton Park, Liverpool	1 bed	Bed and breakfast 3/6 per day; bed and breakfast and late dinner 28/- per week; bed and breakfast, luncheon and dinner 32/- per week
*Mrs. Cartner, 6, Rutherford Road, Heathfield Road, Wavertree, Liverpool	1 single bed 1 double bed	Bed, breakfast 4/-; board, lodging 25/- per week (breakfast, tea and late dinner)
*Mrs. L. Warke, 42, Heathfield Road, Wavertree, Liverpool	2 bedrooms	Bed, breakfast 35/- (18-27 July); bed, breakfast and dinner 2½ guineas
*Miss Sharpe, Sandown Grange, Sandown Park, Wavertree, Liverpool	2 beds 1 sitting room	Bed, breakfast 3/6 per day; board and residence 25/- to 30/- per week

LIVERPOOL MEETING, July, 1912.—List of Apartments.

Name and Address.	Accommodation.	Tariff.
LIVERPOOL:		
*Mrs. Nevatt, Croft House, 43, Sandown Lane, Wavertree, Liverpool	2 beds 2 sitting-rooms	Bed and breakfast 4/-; board and lodgings 35/- per week
*Mrs. Mary Lancaster, 12, Sandringham Road, Tuebrook, Liverpool	1 double bedroom Motor garage 1 sitting-room	Full board 20/- per week and residence
*Mrs. Musson, Trevarth, Kremlin Drive, Stoneycroft, Liverpool	3 beds	Bed, breakfast 5/- per day; bed, breakfast, and dinner 10/- per day, for not less than one week
Mrs. Mary O'Donovan, 79, Newsham Drive, Newsham Park, Liverpool	4 beds 1 sitting-room	Bed and breakfast 3/6; board and lodgings 30/- per week
*Mr. John Hunter, 58, Pemberton Road, Stoneycroft, Liverpool	1 bedroom 1 sitting-room	Bed and breakfast 5/- for two persons per day; board and lodgings £1 per week each
*Mrs. C. Archer, 48, Charles Berrington Road, Wavertree, Liverpool	1 bedroom 1 sitting-room	Bed and breakfast 6/6 per day; full board 10/- per day
*Mrs. S. M. Graham, 11, Brereton Avenue, Church Road, Wavertree, Liverpool	2 bedrooms 2 sitting-rooms	Bed and breakfast 3/- each; board and lodgings 25/- each
WATERLOO:		
Mrs. Yates, 10, Marine Terrace, Waterloo	3 beds	Bed and breakfast 4/-
Mrs. Binks, 1, Marine Terrace, Waterloo	2 beds	Bed and breakfast 4/6
Mrs. MacGregor, 4, Alexandra Road, Waterloo	2 beds	Bed and breakfast 3/6
Mrs. Smith, 7, Kinross Road, Waterloo	2 beds	Bed and breakfast 3/6
Rev. Mather, Park House, Waterloo	4 beds	Full board 7/- per day; 42/- per week. Ladies only
Mrs. Barker, 15, Marine Crescent, Waterloo	2 beds	Bed and breakfast 4/6
Mrs. Jopson, 10, Adelaide Terrace, Waterloo	6 beds	Bed and breakfast 5/-; per week 30/- to 35/-
Miss Haydock, 3, Wellington Street, Waterloo	2 beds	Bed and breakfast 4/-
WATERLOO:		
Miss Barclay, 1, College Road, Waterloo	1 bed	Bed and breakfast 4/-
K. Davey, Welbeck, Waterloo Park, Waterloo, Liverpool	2 single beds 2 double beds 2 sitting rooms	Bed and breakfast 3/6; board and lodgings 6/-
NEW BRIGHTON:		
Mrs. M. Eskrigge, Wave Crest, Victoria Road, New Brighton	6 beds	Bed and breakfast 4/6 (single); bed and breakfast 8/- (double); luncheon 2/-; dinner 2/6; inclusive per day 9/-
Montebello Private Hotel, St. George's Mount, New Brighton	14 beds	Bed and breakfast, single, 3/-; bed and breakfast, double, 8/-; luncheon 2/-; dinner 3/6; inclusive terms per day 8/-
Mrs. E. Gough, Beach House, Rowson Street, New Brighton	Boarding Establishment, 20 to 30 people	Bed and breakfast 4/- per day; full board and residence 7/- per day
Mrs. E. Caldwell, Ellerslie, Albion Street, New Brighton	6 beds, 2 sitting rooms	Bed and breakfast 3/6 per day; board 5/6 per day
Mrs. S. Badham, Sandrock, Rowson Street, New Brighton	20 beds, private hotel	Bed and breakfast 3/- to 4/-; boarding house 4/- to 6/-
Mrs. Morgan, Sandholme, Victoria Road, New Brighton	6 beds (double) 2 beds (single) 2 sitting rooms	Bed and breakfast 4/-; bed, breakfast, dinner and tea £2 2s. 0d. each
Mrs. Fare, Rock Point, 62, Marine Promenade, New Brighton, Cheshire	Private hotel, 20 beds	Terms 6/6 per day
Mrs. Braide, "Riverside," Rowson Street, New Brighton	10 bedrooms	Bed and breakfast 4/-; inclusive terms per day 6/-
Mrs. Gorton, 59, The Promenade, New Brighton	6 bedrooms 2 sitting rooms	Bed and breakfast 3/-; inclusive terms per day 6/-, 7/-
Mrs. Oxford, 60, The Promenade, New Brighton	6 bedrooms 2 sitting rooms	Bed and breakfast 3/-; inclusive terms 6/- and 7/- per day
BIRKENHEAD:		
Mrs. Edith Mulliner, Broadlands, Park Road North, Birkenhead	Board-residence 4 beds	Bed and breakfast 4/-; board and residence 27/6 for one week
Mrs. Jessie Yardley, Stratford, 14, Park Road South, Birkenhead	3 bedrooms 1 sitting room	Bed and breakfast 3/-; board and lodging 35/- per week

ACADEMIC DRESS.

It is hoped Members will wear Academic Dress on the following occasions during the Liverpool Meeting:—8.30 a.m., Tuesday, President's Address; 9 a.m., Wednesday, Roman Catholic Service; 3 p.m., Church Service; 8 p.m., Lord Mayor's Reception; 8 p.m., Friday, Soiree, Walker Art Gallery.

GOWNS, HOODS and CAPS may be had on Sale or Hire on application to—

Messrs. EDE, SON & RAVENSCROFT, 93 & 94, Chancery Lane, London, W.C.
Messrs. L. T. & J. NATHAN, 4, Hardman Street, Liverpool.
Mr. WILLIAM NORTHAM, 9, Henrietta Street, Strand, London.

PATHOLOGICAL MUSEUM.

Chairman of Committee: F. T. PAUL, Ch.M.
Honorary Secretary: ERNEST GLYNN, M.D.
Ex-Officio Members:
THE PRESIDENT-ELECT (Sir James Barr, M.D., LL.D.).
The LOCAL HONORARY TREASURER (T. H. Bickerton, Esq.).
The LOCAL HONORARY SECRETARIES (F. H. Barendt, M.D., Karl A. Grossmann, M.D., W. Thelwall Thomas, Ch.M.).

THE Committee appointed to organize the Museum invites material for it under the following heads:

I. Exhibits bearing on discussions and papers in the various sections.
II. Specimens and illustrations relating to any recent research.
III. Instruments relating to clinical diagnosis and pathological investigation.*
IV. Specimens on particular subjects chosen for special illustration in certain of the sections as indicated below.

The Committee has decided to form fourteen sections of the Museum and has chosen certain subjects for special illustration:

Subjects for Special Illustration.

1. Alimentary System.—Congenital deformities; alimentary, biliary, and pancreatic concretions; specimens of oesophagus, including foreign bodies, also instruments * for the diagnosis and treatment of such diseases.
2. Anaesthetics.—Modern anaesthetic apparatus.*
3. Cardio-vascular System.—Neoplasms and granulomata of the heart.
4. Dermatology.—Syphilitic and tuberculous affections of the skin; the results of treatment with carbon dioxide snow.
5. Genito-urinary System.—Specimens illustrating the etiology of hydronephrosis; tumours *in* the adrenal gland.
6. Gynaecology and Obstetrics.—Inflammatory diseases of the uterine appendages; sarcoma of the uterus.
7. Haemopoietic System.—Diseases of the thymus gland.
8. Laryngology, Rhinology, and Otology.
9. Locomotor System and Orthopaedics.
10. Neurology.—Tumours of the pituitary gland; specimens illustrating the pathology of hydrocephalus.
11. Ophthalmology.—Irido-cyclitis and its pathology.
12. Radiography.—Specimens illustrating diseases of the stomach.
13. Respiratory System.—Pulmonary embolism and thrombosis; syphilis of the lung.
14. Tropical Medicine.—Leprosy and Leishmaniasis.

The Committee desires to enlist the hearty co-operation of members, and wishes it to be understood that the above are only suggestions. Specimens illustrative of other conditions will be welcomed.

The Museum will occupy a central position in a fire-proof building surrounded by the lecture rooms, in which the Sectional work is carried on, and will be easy of access.

Every care will be taken of the specimens, and the contents of the Museum will be insured.

The Committee is prepared to make arrangements for a limited number of short special demonstrations in the Museum at stated hours.

All communications should be addressed to Dr. Ernest Glynn, Honorary Secretary, at the Thompson Yates Laboratory, University of Liverpool.

* Exhibits in the Pathological Museum of instruments and apparatus can only be accepted from medical men.

A LIST of periodical publications, official reports, and Blue Books in the Library of the British Medical Association available for issue to members on loan has been printed, and copies can be obtained free on application to the Librarian, at the house of the Association, 429, Strand, W.C. The regulations governing the loan of these publications are stated in the introduction to the list.

The Library is open for consultation from 10 a.m. till 5 p.m. (on Saturdays till 2 p.m.).

To ensure the insertion of notices in this column they must be received at the Central Offices of the Association not later than the first post on Tuesday.

Association Notices.

CENTRAL COUNCIL ELECTION, 1912-13.

IN the case of the Cambridge and Huntingdon, East Anglian, and South Midland grouped Branches, Dr. B. H. Nicholson has withdrawn his candidature, and as a result there will be no contest in this constituency.

BRANCH AND DIVISION MEETINGS TO BE HELD.

BIRMINGHAM BRANCH.—The annual meeting will be held in the Medical Institute on Friday, June 28th, at 3.30 p.m. Business: To receive the report of the Council; election of officers; inaugural address by the in-coming President, Dr. Nason.—J. FURNEAUX JORDAN, J. G. EMANUEL, Honorary Secretaries.

DUNDEE BRANCH: FORFARSHIRE DIVISION.—The annual meeting will be held on Wednesday, June 12th. The place and date of meeting have not yet been fixed.—MARTIN SMITH, Honorary Secretary.

EAST ANGLIAN BRANCH.—The annual meeting of this Branch will be held at Brentwood on Wednesday, June 19th. Members wishing to read papers or to show cases or specimens should communicate at once with the Secretary for Essex, Dr. B. H. NICHOLSON, East Lodge, Colchester.

EAST YORKSHIRE AND NORTH LINCOLNSHIRE BRANCH.—The annual meeting of this Branch will be held at Grimsby on Thursday, June 13th. Business: Annual Report and balance sheet. Election of officers. Presidential address.—EDWARD TURTON, Honorary Secretary.

EDINBURGH BRANCH.—The annual meeting of this Branch will be held in the Hall of the Royal College of Physicians, 9, Queen Street, Edinburgh, on Thursday, June 27th, at 4 p.m. Business: (1) Minutes of last meeting. (2) Apologies for absence. (3) Annual Report and Financial Statement. (4) Treasurer's Report *re* Guarantee Fund. (5) Election of Office-bearers for 1912-13. (6) Discussion on the Aftermath of the Insurance Act, initiated by Dr. Martins, Haddington. (7) Any other competent business.—MICHAEL DEWAR and E. SCOTT CARMICHAEL, Honorary Secretaries.

EDINBURGH BRANCH: SOUTH-EASTERN COUNTIES DIVISION.—The annual meeting of the Branch will be held in the County Rooms, St. Boswells, on Tuesday, June 11th, at 3.15 p.m., Dr. Oliver (St. Boswells) presiding. Business: (1) Annual report. (2) Election of office-bearers. (3) Motion by Dr. Georgeson (Lauder). (4) Motion by Dr. Davidson (Kelso). (5) Consideration of reports and instructions to Representative. (6) Any other business. The Secretary begs to intimate that he does not seek re-election.—JOHN JEFFREY, Honorary Secretary.

FIFE BRANCH.—The annual meeting of this Branch will be held within the Station Hotel, Kirkcaldy, on June 12th, at 3 p.m.—R. BALFOUR GRAHAM, Honorary Secretary.

LANCASHIRE AND CHESHIRE BRANCH.—The annual meeting of this Branch will take place at Bolton on Wednesday, June 19th, 1912.—F. CHARLES LARKIN, Branch Secretary.

METROPOLITAN COUNTIES BRANCH.—The annual general meeting of the Branch will be held at 429, Strand, W.C., on Friday, June 28th, at 4.30 p.m. Agenda: (1) Minutes of last meeting. (2) Report as to the election of new officers. (3) Annual report of Council. (4) Annual report of Representatives of the Branch on the Central Council. (5) Alteration of rules. On behalf of the Council it will be proposed:—That the Branch Rules 11 and 12 be altered to form one Rule—Rule 11—to read as follows: "11. The management of the affairs of the Branch shall be vested in the Branch Council, which shall consist of the officers of the Branch, together with the representatives of the Branch on the Central Council of the Associa-

tion, and representatives of Divisions, as follows: (*a*) *Ex officio*—All the Representatives of the Divisions on the Representative Body. (*b*) *Ex officio*—The Honorary Secretaries of the Divisions. (*c*) One member appointed by each Division, and such other members as the Division may be entitled to appoint on the basis of one representative for every 100 members after the first 50." Branch Rules 11 and 12 are at present as follows: "11. The management of the affairs of the Branch shall be vested in the Branch Council, which shall consist of the officers of the Branch, together with the representatives on the Central Council of the Association elected by the Branch, and representatives of the Divisions. 12. The representatives of the Divisions on the Branch Council shall be not less than three for each Division, of whom one shall be the Honorary Secretary of the Division, and a second the representative of the Division at the Representative Meeting; for every additional 100 members of a Division beyond 50 there shall be an additional representative" [see By-law 16 of the Association]. (6) President's Address: The State, the Poor, and our Profession.—E. W. GOODALL and W. GRIFFITH, Honorary Secretaries.

METROPOLITAN COUNTIES BRANCH: CITY DIVISION.—The general meeting for consideration of the Report of Council, the Agenda of the Annual Representative Meeting, and the instruction of Representatives will be held at the Hackney Town Hall on Thursday, June 13th, at 4 p.m. Members are requested to bring the SUPPLEMENT of the BRITISH MEDICAL JOURNAL of May 11th and 18th.—A. G. SOUTHCOMBE, Honorary Secretary.

METROPOLITAN COUNTIES BRANCH: HAMPSTEAD DIVISION.—The tenth annual meeting of the Hampstead Division will be held on Thursday, June 13th, at 8.15 p.m., at the Central Library, Finchley Road, N.W. Agenda: Election of officers and committee of the Division for 1912–13. Annual Report of the Council. Provisional agenda of the Annual Representative Meeting (SUPPLEMENTS of May 11th and 18th). Members are requested to note the alteration in the date of the meeting.—E. ARTHUR DORRELL, Assistant Honorary Secretary, 7, Cannon Hill, West Hampstead, N.W.

METROPOLITAN COUNTIES BRANCH: KENSINGTON DIVISION.—The annual meeting of the Division will be held at the Town Hall, Kensington, on Friday, June 14th, at 4 p.m. Agenda: (1) Minutes of the last annual meeting. (1) Election of officers, Representatives, and committee. (3) Annual report of the Executive Committee. (4) Consideration of the Agenda of the Representative Meeting. (5) Any other competent business. N.B.—Members are particularly requested to record their votes for the following candidates nominated by the Division when the ballot papers reach them. No more than one vote can be given to each candidate, but members are not obliged to use all their votes:—Central Council: Dr. Charles Buttar. Branch Council: President, Dr. Langdon-Down; Vice-President, Mr. H. W. Chambers; Treasurer, Dr. Lauriston Shaw. The Executive Committee has decided to recommend the following members for the various offices and committee: Chairman, *E. B. Turner; Vice-Chairman, T. Gunton Alderton; Honorary Secretaries, *Percy C. Raiment, W. E. Fry; Representatives at Representative Meetings, *E. B. Turner, *H. Beckett-Overy, *Percy C. Raiment, *H. H. Sturge; Representatives on Branch Council, the Honorary Secretaries, the Representatives at Representative Meetings, and Charles Buttar, Herbert Tanner, M. F. Squire, M. Milton Townsend, R. Cathcart Bruce; Executive Committee, G. A. H. Barton, A. J. Carter, C. E. A. Huddart, H. T. N. Merrick, A. J. Rice-Oxley, G. J. Crawford Thomson, E. F. Travers. Other nominations may be made at the meeting, except in the case of those gentlemen nominated by ballot at the last meeting, and indicated in the above list by an asterisk. H. BECKETT-OVERY, HERBERT TANNER, Honorary Secretaries.

NORTH OF ENGLAND BRANCH: NEWCASTLE-ON-TYNE DIVISION.—A meeting of this Division will be held in the Library of the Royal Victoria Infirmary, Newcastle-on-Tyne, on Thursday, June 20th, 1912, at 8.30 p.m. Agenda: (1) Presentation of Annual Report of the Division. (2) Presentation of annual accounts. (3) Election of Officers, namely, Chairman, Vice-Chairman, and Honorary Secretary. (4) Election of Representatives for the Branch Council. (5) Election of two Representatives of the Division in Representative Meetings of the Association. (6) Election of ordinary members of the Executive Committee. (7) To consider the business of the Annual Representative Meeting (see BRITISH MEDICAL JOURNAL of May 11th and 18th. (8) Revision of rules of this Division. (9) Resolution *re* adoption of Rule Z.—R. J. WILLAN, Honorary Secretary.

NORTHERN COUNTIES OF SCOTLAND BRANCH.—The annual meeting of the Branch will be held at Craigellachie on Saturday, June 15th, 1912. Further particulars will be sent each member by circular.—J. MUNRO MOIR, Honorary Secretary.

NORTHERN COUNTIES OF SCOTLAND BRANCH: INVERNESS-SHIRE, ROSS AND CROMARTY, AND CAITHNESS AND SUTHERLAND DIVISIONS.—A meeting of these Divisions will be held at the Northern Infirmary, Inverness, on Wednesday, June 12th, 1912, at 3 p.m., for the purpose of electing a Representative in Representative Meetings.—J. MUNRO MOIR, Honorary Secretary.

SOUTH-EASTERN BRANCH.—The sixty-eighth annual meeting of this Branch will be held on Wednesday, June 19th, at 2.15 p.m., at the Town Hall, Market Square, Bromley. The Council will meet before luncheon at the Town Hall; notice of the time and agenda for this meeting will be sent to members of the Council in due course. Dr. John Scott (President-elect) kindly invites members to luncheon at the Royal Bell Hotel, from 1 to 2 p.m. Agenda (in addition to the business of an ordinary meeting): (1) To receive the report of the Election of Officers for 1912-13, who shall thereupon take office. (2) To receive the annual report of the Council on the affairs of the Branch, and the annual financial statement. (3) To receive the Revised Rules presented by the Council for adoption by the Branch. (A copy of these rules has been sent to members of the Branch; it should be brought to the meeting and preserved for future reference.) (4) To consider the adoption of the Bradford Rules and of Rule Z recommended by the Council as an addition to the Branch Ethical Rules. (5) Any other business decided on by the Council or any other competent business. Rule 10 (*b*) referring to the annual meeting is as follows: "To consider any matter relative to the honour and interests of the medical profession which may be brought before the meeting by the Branch Council or by a Division. No business shall be discussed under this head without notice thereof having been given to the Secretary, at least fourteen days before the meeting, with the terms of any resolution which is intended to be proposed." Tea will be provided during the meeting. No excursion is arranged; the Council considered that urgent business was likely to arise, and that this meeting should be purely for business. The Bromley and County Club courteously offers to make all members of the Branch attending the meeting honorary members for June 19th. There will be an exhibition of instruments, drugs, and electrical appliances at the Royal Bell Hotel, from 12 noon to 6 p.m. The annual dinner will be held at the Royal Bell Hotel at 6.30 p.m.; charge 6s. each. Wine will be provided by the local members. Members intending to be present at the luncheon or dinner are requested to signify their intention to Dr. A. Tennyson Smith, Shanklin, Orpington, Kent, not later than Saturday, June 15th; members wishing hospitality for the night should also communicate with Dr. A. Tennyson Smith.—E. A. STARLING, Honorary Secretary.

SOUTH-WESTERN BRANCH.—The seventy-third annual meeting will be held on Wednesday, June 26th, at the Victoria Hotel, Newquay, at 3 p.m., when Mr. Roper will resign the chair to Dr. Hardwick. The report of the Branch Council for the year 1911–12, and the annual financial statement for the year 1911 will be presented to the meeting, and the officers of the Branch will be elected for the year 1912–13 Luncheon, by kind invitation of the President-elect, will take place from 1 p.m. to 2.30 p.m., at the Victoria Hotel. The annual dinner of the Branch will be held at the Headland Hotel, at 7 o'clock. Tickets, 7s. each (exclusive of wine), can be had from Dr. Vigurs, Newquay. Early applications for dinner tickets will greatly facilitate arrangements, and in any case they should be made not later than the first post on Monday, June 24th. By the courtesy of the Newquay Golf Club, members of the Branch and their wives will be made honorary members for Wednesday and Thursday, and those wishing games arranged for them should communicate with Dr. W. J. Stephens, Hayne, Newquay. On Thursday a drive to Bedruthan Steps will be arranged provided a sufficient number of names are sent to Dr. W. J. Stephens before June 26th. Members wishing to stay the night in Newquay will find accommodation at the Headland Hotel.—RUSSELL COOMBE, Honorary Secretary.

STAFFORDSHIRE BRANCH: MID STAFFORDSHIRE DIVISION.—The tenth annual general meeting of this Division will be held at the North-Western Hotel, Stafford, on June 14th, at 2.45 for 3 p.m. Agenda: (1) Notice convening the meeting. (2) Minutes of the last annual general meeting. (3) Correspondence, if any. (4) To receive report of Representative at the Special Representative Meeting held in February. (5) To receive report, if any, of Representative on the Branch Council. (6) To receive annual report of Honorary Secretary. (7) To receive reports from Secretaries of the Provisional Medical Committees for the Division area and for Burton-on-Trent. (8) To elect officers for year 1912–13: Chairman, Vice-Chairman, Honorary Secretary, Executive Committee, Ethical Committee, Representative for Annual Representative Meeting, 1912. (9) To instruct the Representative in regard to matters referred to the Divisions for consideration—for example, (*a*) Model Ethical Rules, pars. 76–81 and Appendix ix (SUPPLEMENT of May 11th); (*b*) Public Health and Poor Law, par. 37, p. 507 (SUPPLEMENT, May 18th); (*c*) Certificates and reports on cases, pars. 32 and 33, p. 507; (*d*) State Sickness Insurance, pars. 35 and 36, p. 507. (10) Any other business. (Members are requested to bring with them the SUPPLEMENTS to the BRITISH MEDICAL JOURNAL of May 11th and 18th.)—A. E. HODDER, Honorary Secretary, Stafford.

Meetings of Branches and Divisions.

[*The proceedings of the Divisions and Branches of the Association relating to Scientific and Clinical Medicine, when reported by the Honorary Secretaries, are published in the body of the* JOURNAL.]

BATH AND BRISTOL BRANCH:

TROWBRIDGE DIVISION.

THE annual meeting of this Division was held in the Town Hall, Trowbridge, on May 31st. Fifteen members were present.

Annual Report and Financial Statement.—The SECRETARY presented the annual report and financial statement, which was adopted.

Election of Officers.—The following office-bearers were elected: *Chairman*, Dr. E. T. Shorland (Westbury); *Vice-Chairman*, Dr. Ferguson (Calne); *Representatives on Branch Council*, Drs. Tubb-Thomas, Adye, F. E. Tayler; *Executive Committee:* Drs. Rumboll, G. C. Tayler, Bond; *Secretary and Treasurer*, Dr. Pearse; *Representative*, Dr. Pearse.

Supplementary Pledges.—The SECRETARY presented a report showing that these had been signed by all acting practitioners in the district, with the exception of four.

Guarantee Fund.—The SECRETARY reported that the amount guaranteed by the Division to date was £321 by thirty-six members. He was instructed to communicate with outstanding members again, and to ask those who had already subscribed to increase their amount if possible. Several members present undertook to do this.

Personal Expenses of Representatives.—The Representative was instructed to support the payment of such, but with the recommendation that third class railway fare only should be paid.

Ethical Rules.—It was resolved that consideration of these be postponed.

GLOUCESTERSHIRE BRANCH.

THE annual meeting of this Branch was held at the General Hospital, Cheltenham, on May 16th, at 6 p.m. The PRESIDENT was in the chair, and forty-eight members were present.

Confirmation of Minutes.—The minutes of the last meeting were read and confirmed.

Election of Officers.—Mr. T. S. ELLIS announced the following election of officers for session 1912–13: *President*, Dr. R. Macartney (Cinderford); *Council*, Drs. Wayland Ancrum, Braine-Hartnell, Carter, Cox, Goss, Johns, Mellish, Buckell, Collins, Davies, Grosvenor, and Knight, with Drs. Macartney and Buchanan, *ex officio* members, representing Forest of Dean Section, and Mr. G. A. Peake, ex-President; *Scrutineers*, Dr. Ancrum and Mr. T. S. Ellis; *Auditors*, Dr. Dent and Mr. G. A. Peake; *Ethical Committee*, Messrs. T. S. Ellis, Fowler, and Buckell, and Drs. E. T. Wilson and Soutar; *Secretary*, Dr. D. E. Finlay; *Assistant Secretary*, Dr. N. Longridge.

Nomination to Central Council.—Dr. Herbert Jones (Hereford) was nominated for member of Branch on Central Council.

Annual Report.—It was proposed by Dr. MACARTNEY, seconded by Dr. MEYRICK-JONES, and carried, that the annual report be taken as read and accepted. The following is a summary:

			Compared with 1910.
Membership on December 31st, 1910 ...		132	137
Increases—			
(*a*) New members	22		8
(*b*) Through change of address ...	16		7
(*c*) Through change of boundaries ...	—		—
	—		—
Total additions	38		15
Aggregate		170	152
Losses—			
(*a*) Deaths	2		—
(*b*) Resignations	1		3
(*c*) Through change of address ...	9		16
(*d*) Arrears	2		1
	—		—
Total deductions ...	14		20
Net membership on December 31st, 1911 ...		156	132

		Compared with 1910.
A.—Meetings—		
Meetings held during the year	15	9
Meetings at which scientific or clinical matters were discussed	7	8
Meetings at which medico-political, ethical, or kindred matters were discussed	10	4
Social functions	8	8
Average attendance at meetings ...	34	28
Number of members who attended at least one meeting	—	—
Executive Committee or Branch Council meetings	13	10
Average attendance	11	6.9

B.—Notes of any special questions of local interest dealt with (for example, local medical appointments, matters of public health, contract practice, etc.).

The following non-scientific matters were amongst those discussed:

Committee, Treatment of School Children, met twice.
Committee, Payment for Medical Certificate, met twice.

Financial Statement.—The following financial statement for the year ending December 31st, 1911, was presented:

Receipts.

1911		£	s.	d.
	Balance Dec. 31, 1910	23	0	10
July 14	Capitation Grant	6	12	0
Dec. 30	Money received for Insurance Defence Fund and Subscriptions ...	7	6	0
		£36	18	10

Expenditure.

1911		£	s.	d.
Feb. 11	J. Bellows	1	16	0
March 3	Dr. Collins, Cheltenham Medical Library	3	3	0
,, 28	J. Bellows	3	9	2
April 12	Cheque Book	0	1	0
May 23	E. Dykes Bower, Esq., Piano, Annual Meeting	0	10	6
Jan. 21	Dr. Buchanan, Grant to Forest of Dean Section	5	0	0
July 1	To Secretary, Stamps	1	0	0
,, 4	J. Bellows	6	19	9
Oct. 14	J. Bellows	3	0	7
Dec. 15	To Secretary, Stamps	1	0	0
		26	0	0
	Balance	10	18	10
		£36	18	10

The following is a summary of expenses for the year ending December 31st, 1911:

	£	s.	d.
Printing and Stationery	15	5	6
Cheltenhan Medical Library	3	3	0
Cheque Book	0	1	0
Annual Meeting	0	10	6
Grant to Forest of Dean Section	5	0	0
Stamps	2	0	0
	£26	0	0

Audited and found correct, C. A. PEAKE.
March 13, 1912. ERNEST A. DENT.

Mr. J. G. TURNER, F.R.C.S., L.D.S.Eng., Lecturer on Dental Surgery, Royal Dental Hospital, London, gave an address on the prevention of dental caries. A vote of thanks to Mr. J. G. Turner was proposed by Mr. G. A. PEAKE, seconded by Dr. SOUTAR, and carried. A discussion on the address followed, and Mr. J. G. TURNER replied.

After the meeting fifty-six sat down to dinner at the Town Hall, Cheltenham, and were entertained by the President, a most enjoyable evening being spent.

LANCASHIRE AND CHESHIRE BRANCH:

BURNLEY DIVISION.

THE annual meeting of this Division was held in the Bull Hotel on May 22nd. Dr. ROBINSON occupied the chair. There were also present: Drs. G. S. Pullon, J. W. Ferguson, A. P. Agnew, J. S. Wilson, T. G. Crump, J. Haworth, F. E. Crossley, A. Macgregor Sinclair, W. Purves, H. J. Slave, Thos. Snowball, J. Mackenzie, J. P. Stuart, Chas. Anderson, A. Findlay, R. Stewart, J. Gardner, W. D. Bromley, A. Callam, F. W. Marsden, A. E. Bird.

Confirmation of Minutes.—The minutes of previous meetings were read and confirmed.

Votes of Thanks.—Very hearty votes of thanks were given to the officers of the previous year, and suitably acknowledged.

Election of Officers.—The following were elected to office for the ensuing year: *President*, Dr. T. G. Crump; *Vice-President*, Dr. H. J. Robinson; *Honorary Secretary and Honorary Treasurer*, Dr. A. Edward Bird; *Representative at Representative Meetings*, Dr. H. J. Robinson; *Branch Representative*, J. M. Ferguson; *Executive Committee*, Drs W. J. D. Bromley, A. Callam, F. W. Marsden, G. S. Pullon, F. E. Crossley, T. M. Scott, Thos. Snowball, J. Gardner, Chas. Anderson, A. Heys, R. Stewart, J. S. Wilson.

Nominations for Council.—As the full list of nominations was not published no recommendations could be now made, but the Honorary Secretary was instructed to call a meeting of the Committee to consider the nominations when published, and inform the members of the Division which they recommend for support by the Division.

Annual Report.—The HONORARY SECRETARY presented the annual report, which was read and adopted, as follows:

Interest in the Division during the past year has been greater than ever before, chiefly on account of the Government passing a State Sickness Insurance Act the medical *benefits* of which were so ill-considered that even at the present time the medical profession as a whole cannot possibly undertake the duties which the Act proposes to assign to it. It is gratifying to know that this Act has drawn the members of the profession closer together and enormously increased the membership of the British Medical Association. Our own Division, which includes Burnley, Brierfield, Barrowford, Barnoldswick, Colne, Hapton, Nelson, and Padiham, has grown from seventy-three members last year to ninety-three members now.

There only remain about four medical men in the whole Division who are not members, and it is safe to say that there will not be even that small number in a few weeks' time, for they will be asked to join at once.

There have been nine meetings of the Division, with an attendance of 315, giving an average attendance of thirty-five members per meeting. There have been twenty-three committee meetings, with an average attendance of 10.6.

These figures show that the officers have not been idle during the year. Besides the above meetings, there have been subcommittee meetings and deputations to different bodies. In connexion with the Sickness Insurance Act during its passage through the Houses of Parliament, your Committee has met the local members of Parliament and discussed the medical portions of the bill with them, and written and circularized the Prime Minister, the Chancellor of the Exchequer, Lord Morley, Lord Lansdowne, Mr. Bonar Law, Sir Henry Craik, Sir Philip Magnus, Sir Robert Finlay, as well as the local M.P.s. All the medical men in the Division area signed the declaration and undertaking sent out by the Association.

Your Committee have circularized all the Honorary Secretaries of Divisions and Branches, the Representatives, and Council of the British Medical Association, and lately a Provisional Local Medical Committee has been appointed to safeguard the interests of the profession in the Division area in respect of the National Insurance Act. Some work is being done in connexion with the local guardians and the stipends of their district medical officers, but as the matter is still *sub judice*, mention only is made of it. One medico-ethical case has been amicably dealt with.

The clinical programme has again been wisely left to the Local Medico-Ethical Society, as was also the annual dinner. The committee of the above society is about to meet the committee of the Division together to draw up and circulate a revised tariff of minimum fees to be charged in the district. The Health Committee of the Burnley Corporation has decided to inaugurate a Tuberculin Dispensary in Burnley, and the medical members of that committee, together with the M.O.H., are anxious to meet and explain the suggested *modus operandi* with your Committee. The Division has decided to support (Central) Insurance Defence Fund of the British Medical Association, the objects of which are—first, to assist in defraying the heavy administrative expenses the Insurance Bill and Act have made and will make; and, secondly, to provide, when necessary, compensation or assistance to practitioners who incur loss or require support in respect of action taken through loyalty to the profession. Each practitioner who has not already guaranteed a sum will be approached shortly by members of the Provisional Committee with the necessary forms of guarantee, on which are printed the general objects of the fund and conditions under which it will be used. Another undertaking regarding "Clubs" will be sent round for members to sign. This does not greatly affect this district directly.

The Executive Committee is gratified at the loyalty, unity, and solidity of the profession in this district, and strongly recommends continued united action in maintaining the honour and interest of the medical profession throughout the kingdom.

SALFORD DIVISION.

A MEETING of this Division was held on May 16th, at which Dr. FLETCHER presided, and there were thirty-four members present.

Central Council Election.—The meeting considered the question of nominations of two candidates to represent the Lancashire and Cheshire Branch on the Central Council, and resolved to nominate Dr. T. A. Helme and Dr. O'Sullivan.

Proposed Amalgamation of Divisions.—A proposal was made that the Manchester and Salford Divisions should be amalgamated, but on being put to the vote it was lost by seven votes for and eighteen against.

Work of Advisory Committee.—It was also resolved to request Dr. Hodgson to give some account of the work of the Advisory Committee under the National Insurance Act and the work of the State Sickness Insurance Committee at the annual meeting of the Division, which was to be arranged for a date convenient for him to attend.

MANCHESTER (SOUTH) DIVISION.

THE ninth annual general meeting of this Division was held at the Holy Innocents' Schoolroom, Fallowfield, on Friday, May 24th, at 3.30 p.m. Dr. GRANT DAVIE presided. There were also present: Drs. Barr, Booth, Cotterill, Conway, Chevers, Edlin, Gregory, Goodfellow, Godson, Heathcote, Holt, Crichton Hood, Mitchell, Macgregor, Stowell, Salter, Sawers Scott, Sarjant, Thoseby, and Whitworth.

Confirmation of Minutes.—The minutes of the last meeting (May 3rd) were read and confirmed.

Apologies for Non-attendance.—Apologies for non-attendance were received from Drs. Hopkinson, Russen Rhodes, Stocks, and Webb.

Central Council Election.—Letters were read from Dr. T. A. Helme and Dr. S. Hodgson, thanking the Division and accepting nomination for election on the Central Council.

Circular from Medical Officer of Health.—A letter was read from the Secretary of the Manchester (North) Provisional Local Medical Committee in reference to a circular letter issued by the Medical Officer of Health for Manchester, in which detailed information was sought in relation to the occurrence of tuberculosis. Relative to this Dr. COTTERILL proposed and Dr. STOWELL seconded the following resolution, which, after some discussion, was carried with one dissentient:

> That, in view of the ever-increasing calls made upon the medical profession for gratuitous services for local and national purposes, and having regard to the harsh and discourteous treatment accorded to the profession by those responsible for the passing into law of the National Insurance Act, this meeting of the Manchester (South) Division of the British Medical Association is of opinion that all further demands for gratuitous services by practitioners such as that contained in the letter issued by the Medical Officer of Health for Manchester, May 21st, 1912, on behalf of the Sanitary Committee of the Corporation, be uniformly disregarded and, if necessary, strenuously resisted.

It was also resolved that this resolution be sent to the Medical Officer of Health for Manchester, the press, and the BRITISH MEDICAL JOURNAL.

Annual Report.

The SECRETARY then read the annual report of the Committee, which was as follows:

A. *Division.*—Your Executive Committee has to report that during the year twelve meetings of the Division were held, and that the average attendance at these was 25.2, the numbers varying between 17 and 35. Eight non-

members attended at various meetings. During the year 24 new members have been added to the list; 10 members have removed out of, and 6 into, the Division; one member has resigned. The following list shows how many meetings each member has attended: Drs. Ashcroft (4), Byers (3), Boyd (6), Brockbank (1), Ballantyne (5), Brown (7), Booth (6), Barr (2), Brooke (3), Cameron (2), Chevers (5), Christie (2), Cotterill (9), Crowe (1), Conway (2), Dickey (2), Grant Davie (12), Edlin (11), Gregory (11), Goodfellow (6), Godson (11), Crichton-Hood (10), Heathcote (11), Holt (10), Helme (1), Holmes (2), Hopkinson (9), Howe (6), Hacking (1), Hulme (1), Jones (5), McDougall (9), Macgregor (7), Mitchell (12), Morton (7), Martin (8), Moran (2), McLure (3), Parkinson (1), Pearson (3), Riddall (2), Russen Rhodes (9), Russell (2), Robinson (2), Sawers Scott (7), Simcock (4), Stocks (11), Salter (10), Stowell (9), Sarjant (6), Senior (3), Steinthal (4), Tomkys (6), Thoseby (3), Whitworth (5), Webb (6), Williams (5). Dr. Drummond and Dr. Featherstone (non-members) attended two and one respectively. It will be seen from these figures that the average attendance has increased greatly during the year, and 59 members, as compared with 36 last year, have attended at least one meeting, leaving few practitioners who have not put in one attendance, when we exclude consultants and non practising members. Scientific meetings have been in abeyance this year owing to the urgency of the business undertaken.

B. *Committee.*—The Executive Committee has met nine times, and the following list shows the attendance of each member: Drs. Cotterill (7), Dickey (3), Grant Davie (8), Edlin (8), Gregory (8), Godson (4), Heathcote (4), Hopkinson (7), Mitchell (8), Morton (5), Scott (7), Stocks (8), Simcock (5). Drs. Goodfellow, Webb, and Byers were co-opted for canvassing purposes, and attended on two occasions. Dr. Martin was elected to represent Gorton in place of Dr. Morton, who, your Committee regrets to say, has left the neighbourhood. Dr. Martin, therefore, attended three meetings.

Division Meetings.—On account of the increased attendance the previous custom of holding meetings in the private houses of members has this year been discontinued. It has therefore been necessary to find a public room, and the Holy Innocents' Schoolroom, Fallowfield, has been the most suitable. As a result of this, it has not been possible to provide meetings in the various districts as hitherto.

Among the subjects discussed during the year were: The National Insurance Bill and Act, appointment of a medical officer to the Manchester School for Mothers, the Manchester Coroner in relation to the general practitioner, amalgamation of the Divisions of Manchester and Salford into one Division, ambulance lectures to members of the Red Cross Society, etc.

Scientific Meetings.—Dr. Donald kindly addressed the Division on the subject "Gynaecological Symptoms."

Manchester School for Mothers.—The Manchester School for Mothers decided to advertise for a whole-time medical officer in December, 1911, in the BRITISH MEDICAL JOURNAL and the *Lancet*. The Medical Secretary advised the Honorary Secretary of this Division of this fact (the Secretary of the Manchester School for Mothers being resident within its area) and asked whether the appointment was approved of locally. As it was a matter of urgency, the Chairman and Secretary decided to ask the BRITISH MEDICAL JOURNAL to withhold the advertisement pending further inquiry as to the work of the medical officer. Further information was secured, and it showed that among the duties of the medical officer was "domiciliary visiting." For this and other reasons, the Division, having sought and secured the approval of the Joint Committee of Manchester and Salford, requested the Council's sanction to the insertion of a warning notice in the BRITISH MEDICAL JOURNAL. This was granted. After some correspondence the Committee of the Manchester School for Mothers asked for a deputation of the Joint Committee of Manchester and Salford to meet them. The meeting was held, and certain limitations to the work of the medical officer were jointly approved of: (1) That the medical officer will visit only in special cases, on the authority of the Honorary Medical Officers or the Medical Subcommittee after the Medical Subcommittee has considered the case. (2) That the medical officer will not undertake treatment. (3) That a whole-time medical officer is required mainly to collate statistics and experiences of different centres of the school. Your Committee advised the request for a warning notice chiefly as a protest against the gradually increasing absorption of the work of the general practitioner by whole-time medical officers, and it feels that a considerable degree of protection has been effected by the above restrictions. The Joint Committee considered a satisfactory solution had been arrived at, and in reply to their request for a delegate from the British Medical Association on their committee, appointed your Secretary as its representative.

New By-laws.—According to the new by-laws of the Association the Representative on the Representative Body must be one of the two Representatives of the Division on the Branch Council.

The Manchester Coroner and the General Practitioner.—Your Committee has again considered the relation of the Manchester coroner to general practitioners, and after discussing several cases occurring in this Division, decided to refer the subject to the Joint Committee. The Joint Committee approved of re-opening the case, and a correspondence ensued with the coroner. Your Committee regrets that the conclusions are not of a satisfactory nature to the general practitioner. It has been recommended by the Joint Committee that in future all practitioners in the Manchester area should strictly confine their practice in relation to the coroner within their legal obligations, which means that no report need be given to the coroner or his officers, but only in the case where the practitioner is subpoenaed as a witness to attend the inquest.

Ethical Position of Medical Men called in to Examine Patients under the Care of Another Medical Practitioner.—The recommendation sent up by this Division was adopted by the Representative Body—namely, that where the medical inspector avails himself of the exception to this rule, it shall be his duty to send a letter to the medical attendant stating the fact of his visit and the reasons for his action.

Fund to Defray the Expenses of your Representative at Representative Meeting.—Your Committee wishes again to remind you that a subscription of 2s. 6d. per capita is requested in order to help your Representative to meet the expenses incurred during his attendance at Representative Meetings. Last year less than half the members in the Division contributed to this fund. Your Committee hopes that all those who have not yet subscribed will do so without delay. It should be unnecessary to remind members of the financial outlay incurred by our Representative in the interest of the Division.

Lectures to Members of the British Red Cross Society.—In March, 1912, a member of the Division was asked to give ambulance lectures to the members of a branch of the British Red Cross Society, and requested the Division to advise him on the subject. Your Committee, after consultation with the Acting Medical Secretary, advised that no lectures be given without payment. The member in question adhered to the Association's ruling, and refused to give lectures without remuneration. Your Committee thanked him for loyally adhering to the rules of the Association.

Ophthalmia Neonatorum.—In answer to a request from this Division, Dr. Niven, Medical Officer of Health, Manchester, recommended and procured the assistance of a nurse to attend in all cases of ophthalmia neonatorum in their homes.

Addition to the Rules of the Division.—The following rule was added this year to the Rules of the Division: "That the Representatives of the Division on the Joint Committee be *ex officio* members of the Committee."

Amalgamation of the Divisions of Manchester and Salford.—In August, 1911, the Joint Committee of Manchester and Salford asked the Division whether it was willing that the five Divisions of Manchester and Salford be amalgamated into one Division. Liverpool, Birmingham, Edinburgh, and Glasgow had all supported the principle of a single Division. The main objections to the present system are that the Joint Committee has no legal status in the Association, and that great delay is thereby caused in referring back matter to the Divisions for approval before joint action can be taken. In October the Division approved of the principle of amalgamation. Subsequent to this the Joint Committee formulated a scheme for the amalgamation with certain principles and rules. These were considered by the Division in April,

and most of the alterations suggested by the Division were embodied in the modified scheme which has been issued to every member of the Division.

The National Insurance Bill and Act.—A vast amount of time and work has been devoted throughout the year to the Insurance Bill and Act. Much correspondence has been received from the Central Office and carefully considered at many well-attended meetings of the local profession; and though at first much difference of opinion was rife amongst the members, your Committee is glad to state that at the present time the Division is working harmoniously to fulfil the policy of the Association. In April, 1911, the Division had under consideration the "Report (issued by the Central Council) on the Organization of Medical Attendance on the Provident or Insurance Principle." The Division devoted three meetings to its consideration, and it now appears how thoroughly the Council had anticipated every question which was discussed in connexion with the medical section of the Insurance Bill introduced into Parliament in May, 1911. The care and thought devoted by the Division to the above report has proved of much value throughout the year, when those matters had to be discussed in a form that had every chance of becoming legally enacted. Following the introduction, an active campaign was commenced and a definite policy, now known as the six cardinal points—being the minimum demand of the profession—was agreed on at a Special Representative Meeting held in London on May 31st and June 1st. This policy was issued to every member of the profession, and an active canvass was at once started in each Division in order to secure the support of every practitioner to the Association's policy and to a memorial to members of Parliament. This resulted in nearly 20,000 medical practitioners signifying their support. Your Committee actively got to work and sought (1) to obtain the signature of each medical practitioner to the pledge in favour of the foregoing policy, (2) to get each one to subscribe to the Defence Fund, (3) to get all non-members to join the Association. The local members of Parliament were addressed by letter and the then member for South Manchester was seen by deputation. This interview and the answers to the letters showed that the local members of Parliament had little grasp of the medical provisions of the bill, but that they were willing to support anything "reasonable." A considerable number of new members was at this time added to the list of the Division. At the end of June a deputation from the Association waited upon Mr. Lloyd George, and in that interview he agreed to: (1) Free choice of doctor; (2) representation (*a*) on the Board of Insurance Commissioners, (*b*) on the Advisory Committee, (*c*) on the Health Committee; (3) recognition of a local medical committee. He would promise little in relation to the freedom from control by the friendly societies, and absolutely nothing as to the income limit. In July the Joint Committee offered to organize a defence fund, and this suggestion was adopted by the Division. Later it decided that the fund should be worked from the Central Office, leaving each member to earmark so much for local purposes, which proportion the Division recommended should be one-fifth. In the middle of July the Division had under consideration the Special Report of the Council on the position it had acquired in relation to the medical provisions of the bill. The Division showed considerable dissatisfaction with what had been achieved, feeling that though the Council had made attempts by negotiations, nothing in substance had been obtained. The Division therefore instructed its representative to urge postponement of the discussion of the medical section of the bill till a satisfactory arrangement had been arrived at with the profession, and if this could not be effected to cease negotiations. After the Annual and Special Representative Meetings in July there was an interval in which no action was taken. The campaign was again started in September. At this time the Central Office was seeking all the information it could get about friendly society institutes in view of the Harmsworth amendment, and the possibility of institutes existing at the time of the passing of the bill into law continuing their *status quo* as to their medical arrangements. Towards the end of September, in view of the approaching conference between the Association and the friendly societies to be held in London on October 9th, the Manchester Unity Friendly Society issued a circular to all their medical officers asking them their views with regard to their present existing contracts. The Association, through the organization of the Divisions, suggested a form of answer to be given by all practitioners addressed by the Manchester Unity. This was to the effect that they desired freedom from control by friendly societies and free choice of doctor and patient. As a result of the conference it was understood that most of the medical officers had replied in accordance with the advice and policy of the British Medical Association. In November, 1911, the Council issued a special report on the bill after it had passed through the Committee stage of the House of Commons. This the Division considered at a meeting on November 21st, and a resolution was passed recommending the Council to cease negotiations on account of the unsatisfactory progress made to that date. The Division also recommended the consideration of compensation to medical men who might suffer as a result of the National Insurance Act. At the beginning of December the members of Parliament in the Division were addressed by letter, which stated again the determined policy of the Association in regard to the medical benefits of the bill. To this letter only one member (Sir A. A. Haworth) replied. December probably was the most critical month to the Association in relation to the bill. During this month another energetic campaign to canvass all the practitioners in the Division was undertaken, and when the work had been entered upon, the announcement of the Prime Minister's offer to Mr. Smith Whitaker, Medical Secretary to the Association, to become the Deputy Chairman of the Insurance Commissioners was made. This created a feeling of distrust of the Government amongst the members of the profession, and to this was added indignation when it was understood that the Medical Secretary had accepted the post on the recommendation of the Central Council. All action and feeling appeared to be centred on this political move, and the canvass efforts were rendered more or less futile. The appointment undoubtedly had the effect of splitting the profession; one section in which our Division is included disapproved of the appointment, but adhered loyally to the policy of the Association, another section proceeded to the formation of outside organizations with varied policies. These bodies and several Divisions of the Association spread broadcast a mass of resolutions, nearly all of a strike nature. The indignation that had been stirred up in December continued during January and into February until the Special Representative Meeting held in this month, after a most exhaustive debate, again restored to a great extent unanimity within the profession. In January the attempt to collect reliable details as to the remuneration of medical officers of clubs was not a success, because only one or two of these officers had kept details of their work done in that connexion. To the Special Representative Meeting in February the Division sent a resolution asking the Chairman and Deputy Chairman of the Representative Body to resign. The six recommendations contained in the Report of the Council were approved, with modifications to Nos. 5 and 6. The recommendations were: (1) That negotiations proceed; (2) that no negotiations be entered into with any Insurance Committee till the six cardinal points were granted; (3) that Provisional Medical Committees be formed to organize the profession so as to prevent contract medical practice continuing at rates lower than those approved by the Association, and that a State Sickness Insurance Committee be formed. Another resolution was also sent to the effect that, unless the six cardinal points were placed beyond doubt, further negotiations would be useless.

By-election.—In March of this year there was a by-election in the South Manchester Parliamentary Division. The three local Association Divisions concerned (South, Central, and West) met to consider the proposal to send a deputation to the candidates. This proposal was rejected, and it was decided to issue a manifesto to inform the public regarding the objections of the profession to the medical provisions of the Act. This manifesto was issued to all the Manchester daily papers and the *Times*, and copies were sent to the candidates. The Liberal candidate, who held Government office, was defeated.

Provisional Local Medical Committees.—In accordance with Minute 63 (Special Representative Meeting, February 1912) the Council urged this Division to proceed to the election of a Provisional Local Medical Committee (P.L.M.C.). Your Committee suggested the appointment

of an organization subcommittee to draw up a scheme for the election and plan of campaign of the P.L.M.C., this subcommittee to be drawn from the various districts of the Division, with Dr. A. E. Cotterill as the Honorary Secretary. The Division approved, and this subcommittee proceeded to hold meetings in the eight subdistricts so that the object of the P.L.M.C. might be explained and that each subdistrict might nominate its representatives on the P.L.M.C. These subdistrict meetings were held, and the Division subsequently elected their nominees to form the P.L.M.C. The canvass was at once started to get all practitioners (1) to join the Association, (2) to guarantee to the Defence Fund, (3) to sign the complementary pledge, (4) to send in their resignations of contract appointments to the Honorary Secretary to be used if necessary, (5) and get those who had no clubs to promise their loyalty in refusing to take any appointment so resigned. This Committee is now busily engaged in its work, and so far the results have been most satisfactory. For election on the Advisory Committee the Division nominated Dr. T. A. Helme, and for the Central Council Dr. T. A. Helme and Dr. S. Hodgson; and for election on the General Medical Council, Dr. Langley Browne, Dr. Latimer, and Dr. Ferguson.

The report on being put to the meeting was unanimously adopted.

Treasurer's Report.—The financial statement was made by the TREASURER and unanimously adopted. The Treasurer explained that all the money available for this year's expenses had been spent, and there was a deficit of 19s. 9d. To meet the expenses to the end of this year the CHAIRMAN proposed that a levy of 2s. 6d. per capita be made. This proposal was carried unanimously.

Election of Officer-bearers for 1912-13.—Dr. STOWELL proposed and Dr. HOLT seconded:

> That the present office-bearers remain in office during the coming year.

Dr. Stowell felt that the special knowledge which the officers had acquired during the past year was essential to complete successfully the programme in relation to the Insurance Act. Whereupon, the CHAIRMAN, while thanking the proposer and seconder for their expression of confidence, pointed out that, apart from personal reasons, the rules of the Division prevented him from accepting office within the next three years. Dr. HOLT proposed that this rule be abrogated for the time being, but the CHAIRMAN stated that no Division rule could be repealed without giving a printed notice of fourteen days. He therefore ruled that the election of new office-bearers be proceeded with. The following office-bearers were then unanimously appointed for the year 1912–13: *Chairman*, H. E. Edlin, M.R.C.S.; *Vice-Chairman*, T. A. Goodfellow, M.D.; *Honorary Secretary and Treasurer*, A. M. Mitchell, M.B.; *Representative on Branch Council*, W. P. Stocks, F.R.C.S., S. C. Salter, M.R.C.S.; *Representative for Representative Meeting*, W. P. Stocks, F.R.C.S.; *Committee*, G. E. Helme, M.B. (Rusholme), G. Stowell, M.B. (Heaton Mersey), R. G. Heathcote, M.R.C.S. (West Didsbury), A.W. Martin, L.R.C.P.and S. (Gorton), D. Booth, M.D. (Heaton Chapel); *Representative on Joint Committee*, Chairman, Honorary Secretary and Representative (*ex officio*, A. E. Cotterill, M.R.C.S., G. H. Grant Davie, M.B.

Installation of Chairman.—Dr. EDLIN then took the chair.

Vote of Thanks to Past Officials.—The CHAIRMAN then proposed a hearty vote of thanks to the past Chairman, Secretary, and other officers for the good work they had accomplished on behalf of the Division during their year of office. This was carried with acclamation. The PAST CHAIRMAN and SECRETARY suitably replied.

Provisional Local Medical Committee. — Dr. A. E. COTTERILL, Honorary Secretary of the Provisional Local Medical Committee, then gave a short account of the work of canvassing the medical practitioners in this Division, which showed that satisfactory progress was being made. Dr. SARJANT expressed very strongly his fears in regard to the lack of information as to the proceedings between the Association and the Commissioners at the present time. He felt that negotiations might be going on whilst members of the Association were being kept in complete ignorance. He desired to know if something could be done to strongly urge the State Sickness Insurance Committee to find out immediately whether or not the seven cardinal points were to be conceded by the Commissioners, so that no distrust might be felt in regard to the proceedings of the delegates of the Association on the Advisory Committee. The CHAIRMAN pointed out that the duties of the Advisory Committee did not consist in negotiations between the Government and interested parties, but that their whole function was advisory in relation to the drawing up of rules and regulations. Dr. COTTERILL showed that their strength lay in organizing the Division in every detail on the lines advocated by the State Sickness Insurance Committee, and thus being ready for any emergency.

MANCHESTER (WEST) DIVISION.

A MEETING of this Division was held in the Technical Institute, Old Trafford, on Thursday, May 16th, at 9 p.m. Dr. PROWSE occupied the chair. There were also present: Drs. Boyd, Brown, Brierley, Coates, Daly, Dearden, Eales, Edge, Farrow, Floyd, Garrett, Hart, Harthan, Helm, Knight, Lawton, Mockler, Morrison, Paterson, Redmond, Scanlon, Strange, and O. H. Woodcock.

Expenditure by Divisions.—A letter was read from the Honorary Secretary of the Branch with regard to expenditure by Divisions. It was resolved that the Secretary of the Division should apply for a grant of 2s. 6d. per member.

The Insurance Commissioners and the Association.—A letter was read from the Joint Committee of the Manchester and Salford Divisions with regard to the position of the Advisory Committee in view of the dilatoriness of the Insurance Commissioners in giving a reply to the demands of the Association. On the motion of Dr. HART, seconded by Dr. BRIERLEY, the action of the Joint Committee in the matter was approved.

Central Defence Fund.—A letter was read from head quarters with regard to the Central Defence Fund. The following resolution was carried, on the motion of Dr. HART, seconded by Dr. O. H. WOODCOCK:

> That this Division of the British Medical Association undertake a canvass of all those who have not already subscribed to the Central Defence Fund with a view to persuading them to subscribe, and that the former committee for that purpose be reconstituted.

Nominations for Central Council.—It was resolved by a majority of 17 to 2 to nominate Dr. E. S. Reynolds and Dr. J. E. O'Sullivan for the Central Council of the Association.

Proposed Amalgamation with Manchester and Salford Divisions.—The following resolution was moved by Dr. WESTWOOD (in the absence of Dr. Stenhouse) and was seconded by Dr. HART, and carried by 13 to 9:

> That we rescind the resolution of October 10th, 1911, to amalgamate the Manchester and Salford Divisions to form one Division of the British Medical Association, and that we decide to remain as at present constituted.

Provisional Local Medical Committee.—On the motion of Dr. WESTWOOD, seconded by Dr. HART, it was unanimously resolved:

> That a Provisional Local Medical Committee be formed with a view to getting the Association pledge signed, and that each of the five districts of the Division shall appoint two members to this Committee, and that the Chairman and Secretary of the Division shall be *ex officio* members.

Invitation to Members Nominated for Central Council.—It was resolved to invite Drs. Reynolds and O'Sullivan to give addresses on their policy at the annual meeting of the Division.

ANNUAL MEETING.

The annual meeting of this Division was held in the Technical Institute, Old Trafford, on Thursday, May 23rd. Dr. PROWSE occupied the chair, and the following members of the Division were present: Drs. Barnes, Brierley, Brayton, Brown, Beaumont, Boyd, Cousins, Cairnie, Coates, Daly, Dearden, D'Ewart, Eales, Edge, Farrow, Floyd, Garrett, Hart, Williams Jones, Knight, Lawton, Mockler, Paterson, Padmore, Stenhouse, Strange, Steele Smith, Scanlon, Walker, Webster, Worswick, O. H. Woodcock, and H. B. Woodcock.

Addresses of Members Nominated for Central Council.—Dr. J. E. O'SULLIVAN and Dr. E. S. REYNOLDS delivered addresses setting forth their views of policy with regard to

the National Insurance Act. The following resolution was then moved by Dr. BRIERLEY, seconded by Dr. STENHOUSE, and carried with two dissentients:

Having heard the addresses of Dr. E. S. Reynolds and Dr. J. E. O'Sullivan, this meeting considers them suitable representatives of the Lancashire and Cheshire Branch in the Council of the Association, and pledges itself to use all legitimate means to secure their return at the head of the poll in the approaching election.

Gentlemen who were not members of the Division then retired.

Circular from Medical Officer of Health.—A letter was read from the Manchester (North) Division with regard to a circular which had been sent out to the profession by the Medical Officer of Health for Manchester, requesting statistics as to the prevalence of tuberculosis in private practices. It was resolved to decline to furnish the required particulars unless an assurance be received from the medical officer of health that 10s. 6d. will be paid for each report.

Resolution of Chelsea Division.—A letter was read from the Chelsea Division, but it was decided to take no action thereon.

Election of Officers.—The meeting then proceeded to the election of officers for the ensuing year. The following were elected: *Chairman*, Dr. Edge; *Vice-Chairman*, Dr. Westwood; *Honorary Secretaries*, Drs. Knight and W. A. Helm; *Representative to Annual Representative Meeting*, Dr. Dearden; *Representatives on Branch Council*, Drs. Hart and Prowse; *Representatives on Joint Committee*, Drs. Brown, Edge, Hart, Knight and Prowse; *Executive Committee*, Drs. Boyd, Brown, Dearden, Edge, Floyd, Hart, Helm, Knight, Mockler, Prowse, O. H. Woodcock and H. B. Woodcock.

ST. HELENS DIVISION.

THE annual meeting was held on May 29th, in the Fleece Hotel, St. Helens. Dr. REID, Chairman, presided, and there were also present: Drs. Cooke, Challonor, Masson, Wilson, Thompson, Graham, Latham, Merrick, Bassett, Holden, Fox, Youatt, Wild, Donnellan, Dowling, Dow, Reid, and Buchan. Drs. Rentoul and O'Sullivan attended as visitors.

Election of Officers.—The following office-bearers were elected for 1912-13: *Chairman*, Dr. Reid; *Vice-Chairman*, Dr. Dowling; *Representative on Branch Council*, Dr. Bassett; *Honorary Secretary and Treasurer*, Dr. Buchan; *Members of Executive Committee*, the office-bearers and Drs. Masson, Wilson, Cooke, Youatt, Watkins, Fox, Merrick, Kerr, and Jackson.

Central Council Election.—Dr. O'SULLIVAN then addressed the meeting regarding the Central Council election and replied to the queries of the members, and after Dr. RENTOUL had spoken he was heartily thanked for his address.

SOUTHPORT DIVISION.

THE annual meeting of this Division was held at the Temperance Institute, Southport, at 8.15 p.m. on May 31st. Dr. LITTLER was in the chair, and there were present: Drs. Ashworth, Baildon, Barwise, Bentall, Cairns, Campbell, Collier, Corkhill, Dall, Woolmer Davies, Edmiston, Harris, Lewis, Penrose, Pridie, Maccall, Reid, Schofield, and Speirs.

Apologies for Non-attendance.—Apologies were received from Drs. Brown, Scott, Swete-Evans, and Walker.

Confirmation of Minutes.—The minutes of the last annual meeting were read and confirmed.

Election of Officers.—Dr. Mewburn Brown was elected Chairman for the year, but in his absence Dr. LITTLER remained in the chair for the rest of the meeting; Dr. Mackay was elected Vice-Chairman; Dr. Baildon Representative at Representative Meetings and Dr. Schofield, Deputy; Drs. Baildon and Harris, Representatives on Branch Council; Dr. Harris, Secretary and Treasurer; and Drs. Littler, Lewis, Pridie, and Speirs, Members of the Executive Committee.

Report of Executive Committee.—The annual report of the Executive Committee was read.

National Insurance Act.—The SECRETARY reported that so far he had received about 100 returns as the result of the canvass of the profession in connexion with the National Insurance Act, and held the resignations of about twenty medical officers of clubs.

Local Defence Fund.—The SECRETARY further reported that he had in hand £52 19s., the balance of subscriptions received to the Local Defence Fund, and was instructed to send £50 to the Central Defence Fund.

Central Council Election.—It was resolved unanimously:

That instruction of our Representative as to the candidate he should support for election at the Representative Meeting be postponed for consideration at another meeting of the Division, to be held before the Representative Meeting.

It was moved:

That Drs. O'Sullivan and Reynolds be recommended to members of the Division for their support.

But an amendment was carried:

That the election be left to the judgement of the individual members of the Division.

Payment of Personal Expenses of Representatives.—It was resolved unanimously:

That, while appreciating the suggestion that Representatives' expenses in addition to railway fares should be paid, this Division considers it inexpedient to vote the payment at the present time.

Resignation of Membership of the Association.—The recommendation to alter the by-law as suggested by Council was approved.

Maps of Divisions and Branch Areas.—The recommendation of Council was approved.

Referendum and Postal Vote.—The recommendation of Council was approved.

Machinery of Association in connexion with Disputes.—This matter was left to the discretion of the Representative.

Medical Federation, Limited.—This question was also left to the discretion of the Representative.

Division Meetings to be held after Representative Meetings.—The recommendation of the Special Representative Meeting on this subject was approved.

Position of Practitioners examining Patients under Care of other Practitioners.—The alteration proposed in the report in regard to this was left to the discretion of the Representative.

Co-operation of Divisions in Ethical Cases.—This was left to the discretion of the Representative.

Model Ethical Rules.—It was resolved *nemine contradicente*:

That this Division recognizes the desirability of the adoption of uniform ethical rules throughout the Association, but leaves the details of the recommendations to the judgement of their Representative, requesting him especially to satisfy himself on the legal safety of the adoption of Rule Z.

Question of Diploma in Psychiatry.—This matter was left to the discretion of the Representative.

Death Certification.—The recommendation to refrain in future from filling in particulars of the duration of disease in any statutory death certificate was approved.

Employment of Medical Students by Practitioners.—The recommendation of Council was approved.

Certificates and Reports of Cases under Workmen's Compensation Act, under Employers' Liability Act, and at Common Law.—The recommendation of Council was left to the discretion of the Representative.

Question of Definition of "Official Duties" of Medical Officers of Health.—The recommendation of Council was approved.

Enlargement of Public Health Committee of Association.—The recommendation of Council was left to the discretion of the Representative.

METROPOLITAN COUNTIES BRANCH:

NORTH MIDDLESEX DIVISION.

THE tenth annual meeting of this Division was held on May 30th, at the Prince of Wales's Hospital, Tottenham. Dr. H. B. BRACKENBURY was in the chair, and over fifty members were present.

Confirmation of Minutes.—The minutes of the meeting of North Middlesex practitioners and of the fifth ordinary meeting of the Division of May 9th were signed as correct.

The late Dr. Butler Hogan.—A vote of condolence with the family of the late Dr. Butler Hogan, Medical Officer of Health for Tottenham and a member of the Division, was passed unanimously.

Powers of the General Medical Council.—The Division's Representative was instructed to support the resolution on the subject passed by the Chelsea Division on May 7th last.

Nomination of Officers of the Branch.—Dr. Langdon-Down was nominated as President-elect of the Branch.

Election of Officers.—The following gentlemen were then elected officers: *Representatives at Representative Meetings*, J. R. Fuller and J. P. Lowson; *Representatives on Branch Council*, H. B. Brackenbury and L. Grant; *Chairman*, J. R. Bryce; *Vice-Chairman*, H. B. Brackenbury; *Members of Executive Committee*, C. G. Burton, H. Distin, W. J. O'Meara, F. A. Spreat, R. T. Vivian, F. C. Wood; *Honorary Secretary and Treasurer*, J. A. Percival Barnes.

Annual Report of Executive Committee.—The annual report of the Executive Committee had been circulated and was adopted.

Fee for Examination of Entrants to an Approved Society.—Dr. C. G. BURTON opened a discussion on this subject, and the following resolution was finally carried:

> That all members of this Division pledge themselves not to examine any person for an approved society for a less fee than half a crown unless under a contract at present to do otherwise.

This terminated the proceedings.

SOUTH-WEST ESSEX DIVISION.

Provisional Medical Committee.

THE following have been elected by postal vote to form the Local Provisional Medical Committee for this Division.

Walthamstow.—Drs. H. McD. Borland, J. Brown, C. J. Horner, Rowland Jones, St. C. B. Shadwell, and C. H. Wise (members); Drs. C. E. Brunton and H. Thornton Challis (non-members).

Leyton and Leytonstone.—Drs. A. Aldrich, F. H. Bonnefin, J. O. Goldie, C. F. Harford, C. H. Panting, and H. Harding Tomkins (members); Drs. W. G. Noble and J. L. Simpson (non-members).

County.—Drs. A. Berrill, J. C. Crawford, C. E. Denning, C. R. Dykes, E. J. F. Hardenberg, and A. Butler Harris (members); Drs. F. Argles and J. D. Cruickshank (non-members). *Ex officio* members are the Chairman, Vice-Chairman, and the Honorary Secretary of the Division.

The first meeting will be held on Tuesday, June 11th, at 4 p.m.

ST. PANCRAS AND ISLINGTON DIVISION.

Election of Representatives.—Dr. William Griffith and Dr. R. M. Beaton have been elected Representatives for Representative Meetings for 1912–13.

WILLESDEN DIVISION.

THE first meeting of the new Willesden Division was held at St. Gabriel's Hall, Anson Road, Cricklewood, on May 30th, at 3.30 p.m. There were present: Drs. Archibald, Anley, Beedham, Bindley, Bridger, Cardinall, Cohen, Whitehall Cooke, Cruden, Percy Evans, Goldfoot, Coram James, Kirkwood, Lock, Macauley, Macevoy, Parr, Rawes, Rutherford, Skene, Anderson Smith, Smurthwaite, Carson Smyth, Soden, Snowman, Traylen, Tudge, Ziemann, and others. Dr. MACEVOY proposed and Dr. TRAYLEN seconded:

> That Dr. Coram James take the chair.

This was carried *nemine contradicente.*

Executive Committee.—Dr. MACEVOY proposed and Dr. WHITEHALL COOKE seconded:

> That the Executive Committee shall consist of twelve members, together with the officers of the Division.

This was carried *nemine contradicente.*

Election of Officers.—The following officers were unanimously elected: *Chairman*, Dr. Coram James; *Vice-Chairman*, Dr. Macevoy; *Honorary Secretary*, Dr. Soden; *Representative on Branch Council*, Dr. Traylen. The election of a Representative to the Representative Meeting was postponed, as the Division has been formed too late to be separately represented, it being represented, however, by the representatives elected by the Hampstead Division, from which it recently has been divided off. *Committee:* The following were elected by ballot as members of the committee:—Drs. Armitage, Bindley, Cardinall, Whitehall Cooke, Crone, Macauley, Anderson Smith, Smurthwaite, Carson Smyth, Rawes, Rutherford, and Skene.

Model Rules for a Division.—The model rules for a Division, as suggested by the Organization Committee, were then adopted with such additions and variations as were considered suitable to the size and numbers of the Division. The adoption of the Ethical Rules was postponed. The Honorary Secretary was instructed to send to the Secretary of the British Medical Association a report of the meeting and a copy of the model rules as adopted, and to see that each member of the committee received a copy.

MIDLAND BRANCH.

DERBYSHIRE DIVISION.

THE annual meeting of this Division was held at the Derbyshire Royal Infirmary on May 24th. Mr. E. COLLIER GREEN was in the chair. There were twenty members present.

Election of Officers.—The following officers were elected for the ensuing year: *Chairman*, E. Collier Green; *Vice-Chairman*, W. St. A. St. John; *Branch Council*, Drs. Chawner, Cassidi, Sims, and W. B. A. Smith; *Executive Committee*, Drs. Boswell, Barber, Heyworth, and Wraith; *Treasurer*, Dr. Barber; *Honorary Secretary and Representative*, Dr. G. K. Smiley, 112, Kedleston Road, Derby.

Proposed New Division.—The following resolution was passed unanimously:

> That this Division approves of the formation of a Division in and around Chesterfield within the boundaries of the area of the Hundred of Scarsdale.

NOTTINGHAM DIVISION.

THE annual meeting of this Division was held at 64, St. James's Street, on May 22nd, Dr. FULTON in the chair. There were sixty-three members present.

Confirmation of Minutes.—The minutes of the previous annual meeting were read and approved.

Work of the Division.—The CHAIRMAN reviewed the work of the Division for the past year. This had been rendered very arduous by the organization of the profession locally with regard to the negotiations under the National Insurance Act. There had also been an increase in the number of scientific meetings. The membership had increased from 133 to 200.

Annual Report and Financial Statement.—The annual report and statement of accounts were submitted and approved.

Election of Officers.—The following officers were elected: *Chairman*, Dr. F. H. Jacob; *Vice-Chairman*, Dr. A. Fulton; *Honorary Secretaries and Treasurers*, Dr. J. H. Mackie, Dr. J. Wilkie Scott; *Representatives*, Dr. A. Fulton and Dr. E. Houfton, and Dr. T. Davies Pryce to act in the possible inability of either of the above mentioned to attend; *Representatives on Branch Council*, Dr. J. H. Cox, C. H. Allen, E. H. Houfton, H. Francis, E. Ringrose. An Executive Committee of sixteen was elected.

Vote of Thanks to Retiring Chairman.—The thanks of the meeting were voted to the retiring Chairman, who had also acted as Representative.

NORTH OF ENGLAND BRANCH:

BISHOP AUCKLAND DIVISION.

THE annual meeting of this Division was held in the Wear Valley Hotel on May 18th, Dr. KANE, the President, in the chair.

Election of Office-bearers.—The first business was the election of office-bearers for the forthcoming year. Dr. Kane was unanimously re-elected Chairman. The SECRETARY (Dr. Hernaman-Johnson), having intimated that stress of work compelled him to seek relief from his duties, was elected Vice-President, and was accorded a very hearty vote of thanks for his conduct of the secretarial office. Dr. A. C. Farquharson was then appointed to the vacant secretaryship. Dr. Kane, Dr. Smeddle, and Dr. A. C. Farquharson were appointed Representatives to the Branch Council.

Provisional Local Medical Committee.—The meeting then proceeded to deal with the question of the formation of Provisional Medical Committees, National Insurance Act. The following resolution was carried unanimously:

That this Division is of opinion that steps should be taken immediately to form a Provisional Medical Committee for the administrative county of Durham.

Supplementary Pledge.—The following resolution was carried unanimously:

That this meeting is of opinion that all members of the Division should sign the above pledge, agreeing to place their resignation of friendly society appointments in the hands of the local Secretary, and that steps should at once be taken for its circulation.

NORTHERN COUNTIES OF SCOTLAND BRANCH:

INVERNESS-SHIRE DIVISION.

A MEETING of this Division was held in Inverness on May 4th, Dr. JOHN MACDONALD (Inverness) presiding.

Election of Officers.—The following were elected office-bearers: *Chairman*, Dr. Duncan MacFadyen, sen.; *Vice-Chairman*, Dr. Miller (Fort William); *Honorary Secretary*, Dr. J. W. Mackenzie (5, Castle Street, Inverness); *Representatives on Branch Council*, Dr. John MacDonald (Inverness), Dr. Thomas MacDonald (Beanby); *Executive Committee*, Dr. Balfour (Aviemore), Dr. Gillies (Inverness), Dr. Johnston (Fort Augustus), Dr. Lindsay (Andersier), Dr. F. M. Mackenzie (Inverness), Dr. T. C. Mackenzie (Inverness).

OXFORD AND READING BRANCH:

MAIDENHEAD DIVISION.

THE annual meeting of this Division was held at Skindle's Hotel, Maidenhead, on Thursday, May 30th. Dr. G. E. MOORE was in the chair. There was a large and representative attendance of members, among those present being the following: Drs. Elgood and Scott (Windsor), Drs. Norris and Amsler (Eton), Dr. Glegg (Datchet), Drs. Charsley, Sadler, and Meggs (Slough); Dr. Jagger (Bourne End), Dr. Floyer (Egham), Drs. Dickson and Wills (Marlow); Drs. Moore, Edge, Whitting, Howard, and Munro, Honorary Secretary (Maidenhead).

Apologies for Non-attendance.—Apologies for absence were received from Dr. Hawkins (Reading), Dr. Hodgson (Chertsey), and Mr. Skevington (Windsor).

Election of Representative.—On the motion of the CHAIRMAN, seconded by Mr. CHARSLEY, Dr. Macleod Munro (Honorary Secretary) was unanimously elected Representative for the Division.

Chairman's Address.—The CHAIRMAN then gave his address, taking for his subject the Various Aspects of Coliuria. An interesting discussion, in which Drs. EDGE, CHARSLEY, WHITTING, and MUNRO took part, followed.

Vote of Thanks.—On the motion of Dr. ELGOOD, seconded by Dr. NORRIS, the Chairman was accorded a hearty vote of thanks.

Dinner.—At the invitation of Dr. MOORE, the members of the Division and the members of the Windsor Medical Society dined together after the meeting.

OXFORD DIVISION.

A SPECIAL general meeting of this Division was held on May 31st at the Radcliffe Infirmary, Oxford, at 3.30 p.m. Mr. STYLE was in the chair, and forty-five members attended.

Confirmation of Minutes.—The minutes of the previous meeting were read and confirmed.

Provisional Medical Committee.—The report of the Provisional Medical Committee was read and accepted.

Supplementary Pledge.—The preliminary canvass of the district had been very satisfactory, and it was now proposed to issue pledges and notices of resignation for signature. A discussion took place on clause (i) of the third paragraph of the pledge, which raised the question of hospital treatment of insured persons. Eventually it was proposed by Dr. NELSON and seconded by Mr. DODDS-PARKER:

That a subcommittee be formed to advise on this matter, this committee to consist of three representatives of the Radcliffe Infirmary staff, together with Dr. Cheatle, Dr. Nelson, and Dr. Scott to represent cottage hospitals, Dr. Boissier to represent Banbury district, Dr. Turrell as representing Oxford practitioners, and Mr. Style, Chairman of the Division.

This was carried *nemine contradicente*. Dr. Wood, of Bampton, was co-opted a member of the Provisional Medical Committee. At the conclusion of the meeting thirty-one members signed the pledge.

SOUTHERN BRANCH:

GUERNSEY AND ALDERNEY DIVISION.

THE annual meeting of this Division was held on May 30th at Gardner's Royal Hotel.

Annual Report and Financial Statement.—The HONORARY SECRETARY read his annual report and financial statement, which were approved by the meeting.

Election of Officers.—The office-bearers for 1912–13 were elected unanimously as follows: *President-elect*, H. D. Bishop, M.D., M.R.C.S., M.O.H. of Guernsey; *Honorary Secretary and Treasurer*, J. F. Carruthers, M.D.; *Librarian*, M. H. Bulteel, M.R.C.S.; *Representative on Branch Council*, Major Myles, R.A.M.C.(ret.).

Executive Committee.—The appointment of a permanent Executive Committee was confirmed.

Annual Dinner.—The annual dinner followed, His Excellency the Lieutenant-Governor and the Procureur du Roi being present as official guests of the Association. The Bailiff of Guernsey, being unfortunately absent in England, was unable to attend. Twenty-seven in all sat down, and a very enjoyable evening followed.

Representative of Jersey and Guernsey and Alderney Divisions.—Dr. J. F. Carruthers was re-elected Representative to Representative Meetings at the Conjoint Meeting of the Jersey and Guernsey with Alderney Divisions, held at Jersey on May 1st.

PORTSMOUTH DIVISION.

Provisional Medical Committee.

THE first meeting of the Provisional Medical Committee which was elected in accordance with a resolution passed at a meeting of members of the medical profession residing within the area of the Portsmouth Division was held on May 21st. All the members elected were present, with one exception. Mr. C. P. CHILDE, F.R.C.S., was called to the chair.

Mr. JAS. GREEN read the report of the scrutineers of the recent voting; this was unanimously adopted.

Dr. SHEAHAN proposed, and Mr. A. BOSWORTH WRIGHT seconded:

That Mr. C. P. Childe be elected Chairman of the Committee.

This was carried unanimously.

Mr. SALMOND proposed, and Dr. BLACKMAN seconded:

That Mr. L. K. H. Hackman be elected Honorary Secretary of the Committee.

This was carried unanimously.

Dr. SHEAHAN proposed, and Mr. H. D. BROOK seconded:

That the Secretary be instructed to take a second vote to determine the representation of Havant and Hayling Island, as there was a tie.

This was carried unanimously.

D 46. The memorandum was read by the CHAIRMAN, and a general discussion followed, during which the Chairman read by request the Memorandum D 49. Dr. COLE-BAKER urged that the pledge be first signed by all who do not hold clubs. Dr. A. V. MAYBURY thought that the Committee should sign first. Mr. SALMOND spoke, as a holder of large clubs, of the difficulty of deciding without knowing exactly the scope of the pledge.

Dr. MUMBY proposed and Mr. SCOTT RIDOUT seconded:

That the Secretary obtain a sufficient number of copies of Memorandum D 49 for the use of the Committee.

This was carried unanimously.

Paragraph 12, Section (*a*). Mr. BLACKWOOD proposed and Mr. LOCKHART STEPHENS seconded:

That a subcommittee be appointed for dealing with Section (*a*).

This was carried unanimously.

Section (*b*). Mr. A. BOSWORTH WRIGHT proposed and Dr. MCELDOWNY seconded:

That the consideration of Section (*b*) be deferred to the next meeting.

This was carried unanimously.

Finance.—Dr. McELDOWNY proposed and Dr. COLE-BAKER seconded:

That a finance subcommittee be appointed to deal with all financial business of the Committee.

This was carried unanimously.

Paragraph 14. Mr. L. K. H. HACKMAN proposed and Dr. MUMBY seconded:

That this Committee agrees to recognize the Council of the Southern Branch of the British Medical Association as the local co-ordinating authority as mentioned in Paragraph 14 of the Memorandum.

This was carried unanimously.

The other business consisted of appointing the above subcommittees, the fixing of meetings, and attention to correspondence.

SOUTH MIDLAND BRANCH:

BUCKINGHAMSHIRE DIVISION.

THE annual meeting of this Division was held on Wednesday, May 22nd, at the Royal Bucks Hospital. All the medical men resident in the Division had been invited. Dr. E. O. TURNER was in the chair, and later Dr. BENSON. There were also present: Drs. J. C. Baker, Bradbrook, G. D. K. Bannerman, F. A. Cooke, D. E. Darbyshire, T. G. Drake, J. G. Durran, England, Graham, Hardwicke, E. H. Helby, Dundas Irvine, Henderson, Square, Smith Wynne, Gardner, Kerr, Larking, Lang, Freeman Long, Moberley, Magrath, McFarland, Rose, L. W. Reynolds, Perrin, Bruce Pearson, T. E. Pemberton, P. Stedman, Shaw, Watson, Wheeler, Vaisey, making a total of thirty-five.

Confirmation of Minutes.—The minutes of the last meeting were read and confirmed.

Annual Report and Balance Sheet.—The annual report and balance sheet were read and adopted. The following is the text of the report: The present number of members is 78, an increase of 16 during the year. Six meetings have been held, with an average attendance of 27. The largest meeting was one when 36 attended; the smallest, 20. A list of non-members is now issued from the Central Office, and it appears that there are 33. Of these 9 have retired from practice, 2 have left the district, 3 do not practise in the district, leaving 19 who ought to belong to the Association. The number of members who attended at least one meeting was 54, an increase of 15 on last year. Three committee meetings have been held, and nearly every member attended each time. The financial statement shows that, after paying a deficit of £2 5s. 6d. from last year, expenses amounting to £9 6s. 3½d., or about 2s. 4d. per member, have been incurred. Nearly all this is due to the Insurance Act, which has led to more meetings and much expense in postage and stationery. The scientific work of the Association has been put in the background, the only opportunities for this being a very instructive address by Mr. Mower White on "Injuries of the Stomach and Intestines" and a clinical meeting, at which interesting cases were shown by the staff of the Royal Bucks Hospital. In connexion with the Insurance Act deputations waited upon the local members of Parliament, and a defence fund to which £250 has been guaranteed from this Division has been formed, and the undertaking has also been signed by nearly every practitioner. The Division decided to nominate Dr. Durran, of Leighton Buzzard, for the Central Council at the forthcoming election. It is to be hoped that with the formation of a Provisional Local Medical Committee the work connected with the Insurance Act will be handed over to these and the work of the Division will resume its ordinary routine. Members are reminded that an annual sum of 2s. 6d. each is due to the Entertainment Fund. There is a deficit in connexion with this, and the Committee ask those who have not contributed to do so at once.

Financial Statement.—The following is the financial statement:

Receipts.

		£	s.	d.
July, 1911.	Received from Treasurer ...	7	15	0
March, 1912.	Extra grant	3	17	0
		11	12	0

Expenditure.

Deficit from last year	2	5	6
Printing and stationery	4	1	0
Postage	3	5	3½
Clerical aid	0	10	0
Clinical meeting	0	15	0
Hire of room	0	15	0
Cash in hand	0	0	2½
	11	12	0

Examined and found correct,

JAMES SHAW.
J. C. BAKER.

Election of Officers.—The officers were elected as follows: *Chairman*, Dr. P. L. Benson; *Vice-Chairman*, Dr. J. Shaw; *Secretary and Treasurer*, Dr. Larking; *Representative*, Dr. Bradbrook; *Deputy Representative*, Dr. Durran or another nominated by Dr. Bradbrook; *Branch Council Representatives*, Dr. Baker and Dr. Durran; *Committee*, Drs. Reynolds, E. O. Turner, H. Wheeler, H. Rose, Perrin, and Henderson.

Report of Central Council.—The report of the Central Council was discussed.

Instruction to Representative.—The Representative was instructed to vote against the proposal by the East Norfolk Division and to suggest that a special fund should be raised in each Division to defray these and other expenses, such as is now the custom in the Buckinghamshire Division.

Fees for Workmen's Compensation Certificates.—The question of payment of fees for certificates, etc., *re* Workmen's Compensation Act was discussed, and it was thought that the suggested fees of £1 1s. and 10s. 6d. were too high for certificates.

Provisional Local Medical Committee.—The memoranda D46 and D49 from the Medical Secretary were read and the election of the Provisional Local Medical Committee was proceeded with. Dr. WHEELER proposed and Dr. MOBERLEY seconded:

That the committee consist of twenty members with the Division Committee as a nucleus.

An amendment was proposed by Dr. MAGRATH and seconded by Dr. REYNOLDS:

That the Committee consist of thirty-two members.

An amendment was proposed by Dr. PEMBERTON and seconded by Dr. BRUCE PEARSON:

That a committee of twenty be elected from the different districts according to the lists, and that the Committee of the Division do not form the nucleus, but that the Chairman and Secretary of the Division be *ex officio* members.

The first amendment was defeated by 13 against 7, the second by 15 against 6. The original resolution was carried by 16 for 0 against. The Provisional Local Medical Committee was then elected—No. 1 District: Drs. Bradbrook, Durran, and Square. No. 2 District: Drs. Churchill, Henderson, E. O. Turner, and Woollerton. No. 3 District: Drs. Baker, Perrin, H. Rose, J. Shaw. No. 4 District: Drs. Benson, Larking, and Kennish. No. 5 District: Drs. Watson, Wheeler, and L. W. Reynolds. No. 6 District was not selected, as only one member was present. It was proposed and carried unanimously:

That the Provisional Local Medical Committee be given power to co-opt members from districts which they consider are inadequately represented.

Supplementary Pledge.—The supplementary pledge was signed by nearly all those present.

Entertainment Fund.—The sum of £2 2s. 6d. was collected towards the special fund (entertainment fund).

NORTHAMPTONSHIRE DIVISION.

THE annual meeting of this Division was held on May 30th, in the Board Room of the Northampton General Hospital, after a luncheon at Franklin's Restaurant, Dr. HICHENS in the chair, and then Dr. BAXTER occupied the chair; twenty members and two visitors were present.

Confirmation of Minutes.—The minutes of the preceding meeting were read and confirmed.

Election of Officers.—The following officers were elected for the ensuing year: *Chairman*, Dr. Baxter; *Vice-Chairman*, Dr. Cooke; *Representative*, Dr. Dryland; *Deputy Representative*, Dr. Roughton; *Representatives on South Northants Nursing Committee:* Drs. Darley and Harrisson; *Honorary Secretary and Treasurer*, Dr. Hichens. Dr. Darley retired from the Executive Committee by lot, and Dr. Relton was elected to fill his place.

Votes of Thanks.—Before leaving the chair Dr. HICHENS proposed a hearty vote of thanks to Dr. Baxter for his valuable and onerous services as Representative of the Division for the last six years. This was seconded by Dr. DRYLAND, and carried with acclamation, and Dr. BAXTER replied. Dr. BAXTER proposed a vote of thanks to Dr. HICHENS for his services in the chair. This was seconded by Dr. DARLEY and carried, and Dr. HICHENS replied.

Annual Report.—The annual report of the Division was as follows:

Membership, December 31st, 1910...		100
Increase—		
New members	24	
Through change of address	2	
Resignations withdrawn	1	
Total additions	27	
Losses—		
Through death	0	
Resignations	2	
Through change of address	4	
Total deductions ...	6	
Net membership on December 31st, 1911		121
Number of practitioners in the Division, December 31st, 1911		170

Financial Statement.—The financial statement was as follows:

	£	s.	d.
Receipts—			
Balance in hand December 31st, 1910	19	6	10
Grant received from Branch Council	12	10	0
Total	31	16	10
Expenditure—			
Hire of Room	—	—	—
Secretarial expenses...	9	18	6
Balance in hand, December 31st, 1911	21	18	4

Report of Proceedings.—The following is a report of the proceedings of the Division during the year:

Divisional meetings held during the year	6
Meetings at which scientific and clinical matters were discussed	0
Meetings at which medico-political, ethical, and kindred matters were discussed	6
Social functions (luncheons)	6
Average attendance at meetings...	40.3
Numbers of members who attended at least one meeting	79
Divisional executive committee meetings	8
Average attendance	7

The meetings were entirely taken up in the consideration of the Government Invalidity Insurance Bill. The Division had the advantage of being addressed by Mr. Smith Whitaker and Dr. Cox, the Medical Secretaries of the Association.

The arrangements in the Division were carefully organized, and of those practising it is believed that only five have not signed the undertaking. A guarantee fund of £1,581 has been promised. A new medical institute has been started at Rugby. It was blacklisted, but a medical man has been found to take the post.

The Provisional Agenda for the Annual Representative Meetings was then considered and special attention was given to the undermentioned motions:

Motions 15, 16, and 17 were approved.
Motion 19 was opposed.
Motion 31 was opposed.
Motion 32, Section IV, the words "and certificates" were deleted.
Section V, words altered to medical reports and 10s. 6d. altered to one guinea.
Motion 33 agreed to with the above modifications.
Motion 36 opposed.
Motion 37 approved.
Motion 48 opposed as not feasible.
Motion 50 opposed.

Model Ethical Rules.—The model ethical rules, including Rule Z, were approved and adopted, on the proposition of Dr. BAXTER, seconded by Dr. LINNELL.

Provisional Medical Committees.—Reports on the Provisional Medical Committees throughout the area of the Divisions were then given by the chairmen and secretaries present, and the meeting terminated.

SOUTH WALES AND MONMOUTHSHIRE BRANCH:

MONMOUTHSHIRE DIVISION.

THE annual meeting of this Division was held in the Savoy Hotel, Newport, Mon., on Friday, May 31st. The CHAIRMAN (Dr. H. C. Bevan) presided, and the following members were also present: Drs. A. Garrod Thomas, Marsh, Glendinning, W. D. Steel, E. Y. Steele, J. L. Thomas, Greer, Basset, Cowie, Elworthy, Lawrence, Crinks, Haslett, Gratte, Griffiths, Acomb, Barnard, Horace Brown, Buckner, Burpitt, Connellan, Cook, E. T. H. Davies, J. Lloyd Davies, Gregg, Hurley, Ingram, A. E. Jones, Rocyn Jones, J. McGinn, Mackay, Mills, O. W. Morgan, Nelis, Neville, Nolan, O'Keefe, Price, Shoolbred, Tonks, Verity, Watkins, I. Crawford, Ryan, and R. J. Coulter and S. Hamilton (Honorary Secretaries).

Apologies for Non-Attendance.—An apology for inability to attend was received from Dr. McInerney.

Confirmation of Minutes.—The minutes of the previous meeting were read and confirmed.

The late Dr. D. J. Jones.—On the motion of the CHAIRMAN, a vote of condolence with the relatives of the late Dr. D. J. Jones, a former member of the Division, was passed, all standing.

Election of Officers.—On the motion of the retiring CHAIRMAN, seconded by Dr. O. E. B. MARSH, Dr. A. Garrod Thomas was unanimously elected Chairman for the ensuing year. Dr. BEVAN then vacated the chair, which was taken by Dr. THOMAS, who thanked the Division for the honour conferred on him, and proposed a hearty vote of thanks to Dr. Bevan for his services during his year of office. This was seconded by Dr. W. D. STEEL, and carried by acclamation, and Dr. BEVAN suitably replied. For the office of Vice-Chairman Dr. E. M. Griffiths was proposed by Dr. GRATTE and seconded by Dr. W. D. STEEL, and duly elected. Drs. R. J. Coulter and S. Hamilton were re-elected Honorary Secretaries. Dr. Crinks, Cowie, Haslett, Marsh, and J. L. Thomas were elected as representatives on the Branch Council, and Drs. Lloyd Davies, Elworthy, Gratte, and J. W. Mulligan as members of the Executive Committee. Drs. Elworthy, Griffiths, and W. D. Steel were elected as representatives of the Branch Contract Practice Committee.

Vote of Thanks to Honorary Secretaries.—A vote of thanks to the Honorary Secretaries for their services during the previous year was proposed by Dr. H. C. BEVAN, seconded by Dr. W. D. STEEL, supported by the CHAIRMAN, and passed unanimously. Drs. COULTER and HAMILTON replied.

Report of Executive Committee.

The following report was read and adopted:

The Executive Committee of the Division begs to report that the expenses of the Division for the year ending December 31st, 1911, were £24 3s. 3d., as compared with £13 for the previous year. The increased expenditure was due to extra work in connexion with the National Insurance Act, the opposition to the Newport School Clinic, and the enforcement of Rule Z. At the end of the year there was a deficit of 19s. 7d., as compared with a balance in hand of £9 15s. 8d. on December 31st, 1910. This deficit is explained by the increased expenditure already referred to and by a decrease in the grants received from the Branch Council, which were £4 5s. less than in the previous year.

During the year eight meetings of the Division were held, the average attendance being 30.12, as compared with 17 during the previous year. Twelve meetings of the Executive Committee were held.

The membership of the Division at the end of April, 1912, was 142, as compared with 130 in 1911, being an increase of 12.

Your Committee regrets that it has to record the decease of Drs. C. P. Skrimshire and D. J. Jones, who were old and valued members of the Division.

The dispute at Ebbw Vale remains unsettled.

A member of the Division consulted your Committee with regard to an attempt to alter the terms of a club appointment to his disadvantage. A Warning Notice was inserted in the BRITISH MEDICAL JOURNAL, and the appointment was confirmed on the same terms as it had been previously held.

Information was received by your Committee that the practitioners in the Blaina district had receive notice to terminate their appointments as surgeons to the Nantyglo and Blaina Collieries, with a view to the introduction of a salaried scheme. A Warning Notice was inserted in the JOURNAL. The original scheme has been abandoned, but the terms under which medical attendance will in the future be provided for colliers in this district are still unsettled.

An advertisement was sent to the medical and lay press for a whole-time salaried medical officer for the Abersychan Collieries, without any notice to terminate their appointments having been given to the medical practitioners who at present attend the workmen in this district. Attention was called to this by the Medical Secretary of the Association and action was taken, in consequence of which the advertisement was refused by the BRITISH MEDICAL JOURNAL and the *Lancet*, and a Warning Notice inserted in the JOURNAL and the local lay press. Up to the present this attempt to start a scheme has proved abortive.

During the year attention has been largely directed to the steps to be taken to safeguard the interests of the profession under the National Insurance Act, and the members of the profession in the district have been canvassed with a view to obtaining their moral and financial support to the policy of the Association. With one or two exceptions every practitioner in the neighbourhood who was approached signed the undertaking, and a canvass for signatures to the supplementary pledge is at present taking place.

Your Committee has received information that medical practitioners have been approached individually by corporate bodies of people who will become insured persons under the Act with a view to arranging terms for medical benefits. The Committee feels that it is highly undesirable that any sectional or individual arrangements should be suggested to these bodies until the time arrives when the whole question of terms under the Act will be settled by the British Medical Association through the Provisional Medical Committees. Steps have been taken to ascertain the opinion of the members engaged in the various classes of practice as to what their remuneration should be, and it is hoped that a report on this subject will shortly be available for the consideration of the Division. A strong Provisional Medical Committee has been appointed which will have charge of all negotiations under the Act.

Your Committee is of opinion that it is of the utmost importance that every member of the profession should sign the supplementary pledge, and failure to do so must be regarded by the profession as an act of dislayalty to its interests. In the present crisis personal matters ought to be subordinated to the common good.

The Annual Representative Meeting will be held in Liverpool, and your Committee recommends that your Representative be given full power to act as he thinks best on the matters which come up for discussion.

Business of Annual Representative Meeting.—It was decided to approve of the recommendations of the Council as set out in the Agenda of the Annual Representative Meeting.

Meetings for Ensuing Year.—It was decided that meetings of the Division should be held at Abergavenny, Newport, Pontypool, and Newport (annual) on the last Fridays of September, November, February, and May respectively.

Patent and Proprietary Medicines.—A letter from the Medical Secretary on the Government inquiry into patent and proprietary medicines was read.

Provisional Local Committees.—The HONORARY SECRETARY OF THE PROVISIONAL MEDICAL COMMITTEE (Dr. Cowie) reported that a canvass of the members of the profession in the district for signatures to the supplementary pledge had been organized and that the results to date were very satisfactory. Drs. Neville, Lewis, Lloyd Davies, W. M. James, J. McGinn, and Rocyn Jones were added to the committee. Attention having been called to the attitude of the staff of the Newport and Monmouthshire Hospital, it was officially reported that all its members had signed the pledge. It was reported that at a meeting of medical practitioners holding friendly society appointments in Newport it had been decided to sign the pledge with the addition of the following proviso:

> I sign the above pledge on condition that when called upon by the British Medical Association to resign my appointments that body will also call upon all its members to resign their appointments, whether honorary or otherwise.

Report re *Dispute.*—The HONORARY SECRETARY reported that information had been received that steps were being taken to form a scheme for a salaried medical service for the Ynysddu and Cwmfelinfach districts, and that the Executive Committee had given instructions for the insertion of a Warning Notice in the JOURNAL if it should be found necessary on further inquiries. This action was approved.

Tea.—The Chairman very kindly entertained the members present to tea.

WEST SOMERSET BRANCH.

A SPECIAL general meeting was held at the Taunton and Somerset Hospital on Tuesday, May 28th, at 3.30 p.m. The chair was taken by the PRESIDENT, Mr. W. B. Winckworth. Twenty-nine members and three visitors were present.

Confirmation of Minutes.—The minutes of the last meeting were read and confirmed.

Insurance Act.—Dr. J. A. MACDONALD, the Representative of the Branch, made a few remarks about the present position with regard to the National Insurance Act.

Recommendations of Council.—Dr. MACDONALD then proceeded to explain the various Recommendations in the Report of the Council, asking for instructions as to how he should vote thereon at the meeting of Representatives. The Recommendations were approved of except in the following:

> Recommendation 86: No diploma be granted in Psychiatry.
> Recommendation 99: (i) Approved. (ii) Approved. (iii) Approved. (iv) Approved. (v) To be thus altered: "or report" to be deleted. For "10s. 6d." to read "2s. 6d."

The amendment to read thus:

> That in the case of all initial examinations with certificate under the Workmen's Compensation Act given by a practitioner, not as a member of the staff of any voluntary hospital, the fee should not be less than 2s. 6d.

It was proposed by Dr. P. JOSCELYNE and seconded by Dr. H. S. POPE:

> (vi) That in the case of all examinations with certificate and report under the Workmen's Compensation Act, given by a practitioner, not as a member of the staff of any voluntary hospital, the fee should be not less than £1 1s.

Provisional Local Medical Committee.—The SECRETARY then read out the scheme as drawn up by the Branch Council for the formation of a Provisional Local Medical Committee, which was adopted with a few minor alterations.

YORKSHIRE BRANCH:

WAKEFIELD, PONTEFRACT, AND CASTLEFORD DIVISION.

Provisional Medical Committee.

A MEETING of the profession in this large and scattered Division was held at the Clayton Hospital, Wakefield, on Thursday, May 2nd, for the purpose of "appointing forthwith for the area of the Division a Provisional Medical Committee to safeguard the interests of the profession." The matter having been brought forward by the CHAIRMAN (Dr. J. W. Walker, of Wakefield) in the form of a recommendation from the Executive, a Provisional Medical Committee for the Division was formed, having the present Executive as its nucleus and recognizing the Yorkshire Branch Council as its co-ordinating authority (as suggested in paragragh 14 of the Memorandum D 46), with three local subcommittees for the districts of (1) Wakefield, (2) Doncaster, and (3) Pontefract, Castleford, Goole, the subcommittees to include every member of the profession resident in each district. The districts were defined for the purpose, and it was left for the members of the Executive resident in the various districts to call together the subcommittees to elect their own chairmen and secretaries and to report to the Executive at the earliest possible date. Since then the first meeting of each of the subcommittees has been held. The reports so far are as follows:

Wakefield District Subcommittee.—The first meeting was held on May 16th. Dr. J. W. Walker was elected Chairman; Dr. May, Honorary Secretary. The following resolution was passed unanimously:

> That the form of pledge and the form of resignation contained in Document D 49 be signed by all members of the profession in the Wakefield district, but that the resignations do not take effect till all the members have signed these forms; further, that the forms be not sent into head quarters until after further meeting.

Another meeting was arranged for Thursday, May 30th.

Doncaster District Subcommittee.—The first meeting was held on Friday, May 24th. Dr. A. Christy Wilson was elected chairman and Dr. H. J. Clarke, jun., was elected secretary. About twenty-six out of fifty were present, and it was agreed that all members of the profession in the district shall belong to the subcommittee. All those present signed the pledge, the pledges being held over till after the next meeting. Members present were appointed to canvass all those who were not present.

Pontefract-Castleford-Goole District Subcommittee.—The first meeting was held at Pontefract on Tuesday, May 21st. Dr. John Orford of Pontefract was elected chairman and Dr. Hillman of Castleford secretary. There were about fifty practitioners resident in the district. Over thirty pledges have been signed. Various members present at this meeting were appointed to see those who had not signed with a view to getting their signatures.

HARROGATE DIVISION.

THE annual meeting of this Division was held at the Hotel Majestic on Wednesday, May 29th, at 8.30 p.m. Dr. GRANGE, Chairman, presided, and there were present Drs. Black, Solly, Johns, Johnstone, David Brown, Pringle, Crawford Watson, Boyd, Edgecombe, Kelsey, Malim, Thompson, Mantle, Mouillot, Greenwood, Steven, Dimmock, Ryan, and Gibson.

Election of Officers.—The following officers were elected: *Chairman*, Dr. F. N. Ozanne; *Vice-Chairman*, Dr. F. W. Garrad; *Honorary Secretary*, Dr. E. S. Steward; *Representative for Representative Meetings*, Dr. F. Bennett; *Representative at Branch Meetings*, Dr. E. Solly; *Executive Committee*, Drs. Chamberlain, Collier, Daggett, Lever, Mackay, Solly, Bertram Watson, and Crawford Watson.

Vote of Thanks to Retiring Officers.—A vote of thanks was passed to the retiring officers.

Provisional Medical Report.—Dr. PRINGLE read the Provisional Medical report, which was discussed.

Patent and Proprietary Medicines.—Dr. GIBSON reported a letter with regard to the Government inquiry as to patent medicines, etc.

Motion re Payment of Representatives.—A motion that Representatives be not paid was carried by 18 to 2.

Motion re Printed Matter forwarded to Divisions.—A motion that the printed matter forwarded to the Divisions is excessive in quantity and unduly complicated in form, was carried unanimously.

New Maps.—A motion that new maps were unnecessary was also carried unanimously.

Referendum by Postal Vote.—A motion that the Referendum by Postal Vote was necessary, or a large majority of the members of the Association would be practicelly disfranchised, was carried unanimously, and it was thought that the meetings of Representatives, when practicable, should be held in the provinces.

Death Certificates.—The views of the Council as to certificates of death and under the Employers' Liability Act were upheld.

Ship Surgeons.—A motion:

> That this meeting of the Division is in entire sympathy with the efforts of the Council to ameliorate the conditions of service of ship surgeons, but, in the absence of any concrete proposal to that end, does not feel called upon to suggest any,

was carried, and it was suggested that a capitation fee for each passenger landed would be satisfactory.

DORSET AND WEST HANTS BRANCH.

DR. FRANK FOWLER, Honorary Secretary of the Branch, informs us that at a meeting of the Council of the Dorset and West Hants Branch held in Bournemouth on June 5th, it was resolved:

> That the Council of the Dorset and West Hants Branch repudiates any knowledge of the nomination of Mr. C. H. Watts Parkinson and disapproves of his candidature for the representation of the South-Western and Dorset and West Hants grouped Branches on the Central Council. That a copy of this resolution be sent to the Honorary Secretary of the South-Western Branch, to the BRITISH MEDICAL JOURNAL, and to every member of the Dorset and West Hants Branch.

NORTH LANCASHIRE AND SOUTH WESTMORLAND BRANCH:

FURNESS DIVISION.

THE annual meeting of this Division was held on May 31st at Barrow.

Annual Report.—The annual report was read and adopted.

Representative's Expenses.—It was decided to subscribe 5s. each towards defraying them.

Guarantee Fund.—It was decided to leave this question to Provisional Medical Committees, as it was felt that it was not a fair arrangement for non-members to leave to members of the Association both the paying and the fighting.

Office-bearers for the Year.—The following were elected officers for the ensuing year: *Chairman*, Dr. Sansom (Barrow); *Vice-Chairman*, Dr. Pooley, (Dalton); *Honorary Secretary*, Dr. J. Livington (Barrow); *Representative to Representative Meeting*, Dr. Daniel (Barrow); *Representatives to Branch Council*, Dr. Callaghan (Barrow), Dr. Johnston (Ravenglass); *Committee*, Dr. J. A. Reed (Barrow), Dr. Wilson (Barrow).

SOUTH-EASTERN BRANCH:

CHICHESTER AND WORTHING AND THE HORSHAM DIVISION.

A COMBINED meeting was held on June 1st at the Infirmary, Chichester, Dr. SIMPSON in the chair.

Confirmation of Minutes.—The minutes were read and confirmed.

Election of Officers.—The following were elected officers of the Chichester and Worthing Division: *Chairman*, Dr. Simpson; *Vice-Chairman*, Dr. Ewart; *Representative on Branch Council*, Dr. Gostling; *Joint Honorary Secretaries*, Drs. A. Densham and A. S. Morton Palmer; *Executive Committee*, Chairman and Honorary Secretaries (*ex officio*), Drs. Eustace, Hinds, Ewart, Haydon, Garratt, Morris, Cameron, Chaplin.

Election of Representative to Representative Meeting.—(*a*) It was proposed by Dr. VERNON, seconded by Dr. RENTOUL:

> It is desirable that these combined Divisions be represented by a general practitioner.

This was carried *nemine contradicente.* (*b*) It was proposed by the CHAIRMAN, seconded by Dr. CAMERON:

> That Dr. Eustace be elected Representative to the Representative Meeting.

This was carried *nemine contradicente.*

Recommendations of Council.—The Representative was instructed: To support recommendations in paragraphs 37, 54, 59, 61, 75, 76, and 93; to use his discretion as to paragragh 77 and to give special attention to the consideration of paragraph 99; as regards paragraph 35, that he oppose the payment of extra expense to the Representatives, owing to the present financial strain on the Association.

Executive Committee.—It was proposed and carried that the "Medico-Political Committee" should henceforth be known as the "Executive Committee."

Provisional Medical Committee.—It was resolved that the Executive Committee should be constituted the "Provisional Medical Committee for the Division," with power to add to its number for special purposes.

The Supplementary Pledge.—It was resolved that the Honorary Secretaries should at once obtain an adequate supply of the new pledge and contract resignation forms from the Central Office of the Association.

SCHOLARSHIPS AND GRANTS IN AID OF SCIENTIFIC RESEARCH.

SCHOLARSHIPS.

THE Council of the British Medical Association is prepared to receive applications for Research Scholarships, as follows:

1. An ERNEST HART MEMORIAL SCHOLARSHIP, of the value of £200 per annum, for the study of some subject in the department of State Medicine.
2. THREE RESEARCH SCHOLARSHIPS, each of the value of £150 per annum, for research into some subject relating to the Causation, Prevention, or Treatment of Disease.

Each Scholarship is tenable for one year, commencing on October 1st, 1912. A Scholar may be reappointed for not more than two additional terms.

The conditions of the award of Scholarships are stated in the Regulations, a copy of which will be supplied on application to the Medical Secretary of the Association, 429, Strand, London, W.C.

GRANTS.

The Council of the British Medical Association is also prepared to receive applications for Grants for the assistance of Research into the Causation, Treatment, or Prevention of Disease. Preference will be given, other things being equal, to members of the medical profession and to applicants who propose as subjects of investigation problems directly related to practical medicine.

The conditions of the award of Grants are stated in the Regulations, a copy of which will be supplied on application to the Medical Secretary of the Association, 429, Strand, London, W.C.

Applications.

Applications for Scholarships and Grants for the year 1912–13 must be made not later than Tuesday, June 11th, 1912, in the prescribed form, a copy of which will be supplied by the Medical Secretary on application.

Each application should be accompanied by testimonials, including a recommendation from the head of the laboratory, if any, in which the applicant proposes to work, setting out the fitness of the candidate to conduct such work, and the probable value of the work to be undertaken. This is not intended, however, to prevent applications for Grants in aid of work which need not be performed in a recognized laboratory.

ALFRED COX, *Medical Secretary.*

429, Strand, London, W.C.

THE LIBRARY OF THE BRITISH MEDICAL ASSOCIATION.

THE following books were added to the Library between October and December, 1911:

Presented by the Authors.

Berkeley and Bonney: Gynaecological Surgery. 1911
Binnie: Manual of Operative Surgery, fifth edition. 1911
Jennings: The Morphia Habit and its Voluntary Renunciation. 1909
Milligan and Wingrave: Practical Handbook on Diseases of the Ear. 1911
McKisack: Dictionary of Medical Diagnosis, second edition. 1912
Williams, A. W.: Index of Dermatological Literature. 1910
Witthaus: Manual of Toxicology, second edition. 1911

Presented by Dr. F. W. Mott.

Archives of Neurology and Psychiatry, vol. v. 1911
Collected Papers from the Pathological Laboratories of the London County Council. 1911

Presented by Sir William Osler, Bart., F.R.C.P.

Vallery-Radot: Life of Pasteur, 2 vols., translated by Mrs. Devonshire. 1911

Presented by the late James Taylor, Esq., F.R.C.S., Chester.

Annals of Surgery, 1893 and 1891, to complete.
Archives Internationales de Chirurgie. 1903–1910
Gowers, Sir W.R.: Problems in Practical Diagnosis (Shorthand). 1909
Gruner: Microscopical Diagnosis of Diseases of the Blood (Shorthand). 1910
Journal of Physiology, vol. i, incomplete. 1878
North of England Obstetrical and Gynaecological Society, Transactions, etc. 1892–1898
Phonographic Outlines of Medical Terms. 1898
Phonographic Record of Clinical Teaching. 1895–1910

Presented by Dr. Dawson Williams.

Hunter, W.: Severest Anaemias, vol. i. 1909

Added to the Library through the "British Medical Journal."

Bandler, S. W.: Vaginal Celiotomy. 1911
Corner, E. M.: Life History, Function, and Inflammation of the Appendix. 1911
Crossen, H. S.: Diseases of Women, second edition. 1910
Deutschen Hospitals, Festschrift zur Vierzig-jahrigen Stiftungsfeier des. 1909
Giles, A.: Gynaecological Diagnosis. 1906
Holleman, A. F.: Textbook of Organic Chemistry, third edition. 1910
Jago, W., and W. C.: The Technology of Breadmaking. 1911
Landau, Leopold: Festschrift seines 25—Jahrigen Docenten Jubilaums. 1901
Maudsley, H.: Heredity, Variation, and Genius. 1908
Newman, Geo: Infant Mortality. 1906
Progressive Medicine, vol ii. 1911
Ross, H. C.: Further Researches into Induced Cell-reproduction and Cancer. 1911
Steven, E. M.: Medical Supervision of Schools. 1910
Stewart, D.: Essentials of Food. 1911
Tauffer, W.: Abhandlungen aus dem Gebiete des Geburtshilfe und Gynäkologie, Band 1, Heft 1. 1909
Universitäts Frauenklinik in Leipzig; Festschrift zur Jahrhundertfeier. 1911
Nazifdar, N. J.: Physiology of the Central Nervous System and the Special Senses. 1911
Walker-Tisdale, C. W.: Milk Testing. 1911

Calendars, Reports, and Transactions have been received from the following bodies:

Aberdeen University Calendar. 1912
Advisory Committee for the Tropical Diseases Research Fund. Report. 1910
American Association of Genito-Urinary Surgeons, Transactions, vol. vi. 1911
American Otological Society, Transactions, vol. xii, II.
Bengal, Annual Returns as to Charitable Dispensaries. 1909
Bengal, Annual Returns, Lunatic Asylums. 1909
Bengal, Eastern, Dispensary Returns. 1909
Bengal, Eastern, Annual Report on Lunatic Asylums 1909
Bengal, Eastern, Annual Sanitary Report. 1909
Bengal, Eastern, Annual Report on Vaccination. 1909–10
Birmingham University Calendar. 1911–12
Board of Education, Annual Report of Chief Medical Officer. 1910
Bombay, Administration Report. 1909–10
Bombay, Annual Report on Civil Hospitals. 1909
Bombay, Annual Report on Lunatic Asylums. 1909
Bombay, Annual Report of the Sanitary Commissioner. 1909
Bombay University Calendar, i and ii. 1912
British Guiana, Report on the Nastin Treatment of Leprosy. 1908–10
Burma, Report on Hospitals and Dispensaries. 1909
Burma, Report on Lunatic Asylums. 1909
Burma, Report on Sanitary Administration. 1909
Calcutta, Report of the Health Officer. 1909
Cape Town Corporation, Annual Report of the Medical Officer of Health. 1910–11
Central India Agency, Report on Dispensaries, Jails, and Hospitals. 1908
Central Provinces, Notes on Vaccination. 1908–9
Central Provinces, Reports on Lunatic Asylums. 1906–8
Central Provinces and Bera, Notes on Hospitals and Dispensaries. 1908
Central Provinces and Bera, Sanitary Commissioner's Report. 1908
Ceylon, Administrative Report (Medical). 1909
Ceylon, Hospital Returns. 1909
Colombo, Report of the Medical Officer. 1909
Commissioners in Lunacy, 65th Report. 1911
Dublin University Calendar, part i. 1911–12
Dundee University Calendar. 1910
Durham University College of Medicine Calendar. 1911–12
Edinburgh Obstetrical Society, Transactions, vol. xxxvi. 1910–11
Edinburgh Royal College of Physicians, Laboratory Reports, vol. xi. 1911
Glasgow Medico-Chirurgical Society, Transactions, vol. x. 1911
Grant Medical College, Calcutta, Annual Report. 1909–10
Imperial Cancer Research Fund, Fourth Scientific Report. 1911
King's College Calendar. 1911–12
Lahore Municipality, First Annual Report. 1910
Lahore Municipality, Report on Measures Taken against Malaria. 1909
Lister Institute of Preventive Medicine, Collected Papers, vol. vii. 1910–11
London County Council, Annual Report of the Asylums Committee. 1911
Madras Presidency, Report on Lunatic Asylums. 1909
Madras Presidency, Report of the Sanitary Commissioner. 1909
Metropolitan Water Board, Reports on Water Supply. 1911
Michigan Medical Society, Transactions, vol. i. 1910
National University of Ireland Calendar. 1911
Navy, Statistical Report on the Health of the. 1910
New Jersey State Board of Health, Report, vol. xxxiv. 1910
North-West Frontier Provinces, Annual Report on Dispensaries. 1909
North-West Frontier Provinces, Annual Report on Vaccination. 1909–10
North-West Frontier Provinces, Annual Report on Sanitary Administration. 1909
Ontario, Canada, 29th Annual Report of the Provincial Board of Health. 1910
Ophthalmological Society of the United Kingdom, Transactions, vol. xxxi. 1911
Pasteur Institute of India, Ninth Annual Report. 1909
Philadelphia Academy of Surgery, Transactions, vol. xiii. 1911
Punjab, Annual Report on Dispensaries. 1909
Punjab, Statistics of Lunatic Asylums. 1909
Punjab, Annual Report on Sanitary Administration. 1909
Punjab, Annual Report on Vaccination. 1909–10
Rangoon, Report of the Government Medical School. 1909
Reading Pathological Society, Reports. 1910–11
Royal College of Surgeons Calendar. 1911–12

Southern Surgical and Gynaecological Society, Transactions, vol. xxiii. 1910
South African Medical Congress, Twelfth Transactions. 1910
Sydney University Calendar. 1911
United States Hygienic Laboratory Bulletins, Nos. 76–77. 1911
United States Army, Reports of the Surgeon-General. 1902–11
University College London Calendar, 1911–12
Victoria University of Manchester Calendar. 1911–11
War Office, Report on the Health of the Army. 1910
Winnipeg City, Health of. 1910

BOOKS NEEDED TO COMPLETE SERIES.

THE Librarian will be glad to receive any of the following volumes, which are needed to complete series in the Library:

American Association of Genito-Urinary Surgeons. Transactions. 1906.
American Climatological Transactions. Vols. 1, 4, 5, 6,
American Dermatological Association Transactions. Vols. 5, 7, 8, 11, and 29.
American Journal of the Medical Sciences. New series, vols. 4, 5, 1842–3; vols. 14, 15, 1847–8; vols. 18–30, 1850; vol. 33, 1857; vol. 46, 1864–5; vol. 59; or any parts of these vols.
American Journal of Ophthalmology. Vols. 1–9.
American Laryngological Association. Transactions. Vols. 1–6, 8–9.
American Medical Association. Transactions, 2, 4, 6, 7, 11, 12, 14, 15, 16, 19, 20, 22, 31, after vol. 33, and the *Journal*, up to 1903 inclusive.
American Medico-Psychological Association. Transactions. Vol. 13, 1906.
American Otological Society. Transactions. Vol. 3, part 2, 1883.
American Public Health Association. Transactions. Any vols.
Analyst. Vols. 1–24.
Annals of Surgery. Vols. 13, 14, 26.
Archiv für Dermatologie und Syphilis. Bd. 24 and 25 (1892 and 1893).
Archives générales de médecine. Third new series 7–8 (1839–40); 4th series, 10–17, 20–25, 1852–55, 1858–64, 1872–1897; 1846–55 inclusive; 1857–64 inclusive; 1871.
Archives of Ophthalmology. Vols. 1–3, 6, 7, 14, 15, 16 and 20.
Archives of Otology. Vols. 1–7, and 20–22.
Archives de Parasitologie. Vols. 1–8.
Archives of Pediatrics. Vols. 1–16.
Asylum Journal of Mental Science. Vol. 1, 1854.
Biochemical Journal. Vols. 1–4.
British Dental Journal. Vols. 1–29.
Biometrika. Vols. 2–6.
British Journal of Dermatology. Vol. 2, part 3.
British Laryngological and Rhinological Association. Transactions 1896–7–8–9.
Caledonian Medical Journal. Vol. 1 prior to 1894.
Canada Medical Journal. Vols. 1–4, 6, and after 8.
Carmichael Essays. Rivington, 1879.
Centralblatt für Augenheilkunde. Hirschberg. All prior to 1891; Index to 1891.
Centralblatt für Bakteriologie. Bound volumes prior to 1899.
Centralblatt für medicinische Wissenschaften. Vols. 1–19.
Centralblatt für Nervenheilkunde. 1878, 1879, 1886, 1889, 1890, 1892, and since 1893.
Congrès Français de Chirurgie. Transactions 1, 2, 3, 6, and 10, and all since 11th.
Congrès Internat. d'Obstétrique et de Gynécologie. 3. Amsterdam, 1899.
Congress für innere Medicin: Verhandlungen. 1–12, and 14, and since 18.
Dermatological Congress. Vienna, 1892.
Dermatologischer Jahresbericht, 1906–1908.
Dermatologische Zeitschrift. Vols. 1–16.
Dublin Quarterly Journal of the Medical Sciences. Vols. 1, 10, 17, 20, 28, and 35–40.
Edinburgh Obstetrical Transactions. Vol. 5.
Glasgow Medical Journal. 1833 and 1853–1868.
Glasgow Pathological Society. Transactions 1 and 2.
Guy's Hospital Gazette. Nos. 1 and 5. 1872.
Indian Medical Gazette. 1868–1884.
Intercolonial Medical Journal, Australasia. Vols. 1-13.
International Congress on Alcohol. Proceedings of First to Eleventh.
International Congress of Genetics. Transactions. (1) London 1899, (2) New York 1902, (3) London 1906.
International Congress of School Hygiene. Transactions of First Congress, Nuremberg.
International Congress of Hygiene. Transactions of Congresses 1–6 and 10–12.
International Medical Congress. Budapest, 1909. Section 4, Part 2; Section 7B, Part 1; Section 15, Part 2.
International Ophthalmological Congress. Transactions of Fifth; New York, 1876.
Jahrbuch für Kinderheilkunde. Bd. 1–9.
Jahresbericht Neurologie und Psychiatrie, 6 and 11–14.
Janus. All vols., 8–15.
Journal of Association of Military Surgeons. Vol. 19, 1906.
Journal of Laryngology. Vols. 1–9.
Semaine Médicale, prior to 1884. Titles for 1884 and 1895.
South African Medical Journal. February and April, 1895. Titles, Vols. 3 and 4.
United States Department of Agriculture, Bureau of Animal Industry. Reports 1–7, 10–14.
United States Hygienic Laboratory Bulletins. Nos. 3, 8, 9, 10, 11, 12, 13, 15, 17, 18, 19, 24, 29, 43.
Virchow's Archiv. Vols. 1–150.
Watt. Bibliographia Britannica, 4 vols. 1824.

CENTRAL MIDWIVES BOARD.

A SPECIAL meeting of the Central Midwives Board was held on May 30th at Caxton House, Westminster, with Sir FRANCIS H. CHAMPNEYS in the chair.

Midwives Struck off the Roll.

The Board considered the following charges amongst others against the midwives whose names are given below, and ordered them to be struck off the Roll.

Margaret Broadbery, that being in attendance as a midwife at a confinement, the child suffering from inflammation of the eyes, she did not explain that the case was one in which the attendance of a registered medical practitioner was required, nor did she hand to the husband or the nearest relative or friend present the form of sending for medical help, properly filled up and signed by her, in order that this might be immediately forwarded to the medical practitioner, as required by Rule E 20 (5).

Martha Downes, that she did not keep her appliances and equipment in a cleanly condition, as required by Rule E 1; that she neglected and refused to record the pulse and temperature of her patients, as required by Rule E 13; and that she systematically evaded supervision and inspection by the local supervising authority.

Mary Ann Grix, that being in attendance as a midwife at a confinement she did not adopt the antiseptic precautions required by Rules E 3 and 7, she did not wash the patient at any time, and she did not take the patient's pulse or temperature at any time.

Caroline Halls, that being in attendance as a midwife at a confinement, the child being dangerously feeble at birth, she did not explain that the case was one in which the attendance of a registered medical practitioner was required, nor did she hand to the husband or the nearest relative or friend present the form of sending for medical help, properly filled up and signed by her, in order that this might be immediately forwarded to the medical practitioner, as required by Rule E 20 (5). The death of the child having occurred before the attendance of a registered medical practitioner, she did not notify the local supervising authority thereof, as required by Rule E 21.

Elizabeth Kimberley, that being in attendance as a midwife at a confinement she did not adopt the antiseptic precautions required by Rules E 3 and 7, that she was uncleanly in her person, clothing, house, and appliances, and that she did not keep her register of cases as required by Rule E 23.

Emma Pitman, that being in attendance as a midwife at a confinement, she did not take or record the patient's pulse and temperature as required by Rule E 13, and the patient being ill, with high temperature and abdominal pain, she did not explain that the case was one in which the attendance of a registered medical practitioner was required, nor did she hand to the husband or the nearest relative or friend present the form of sending for medical help, properly filled up and signed by her, in order that this might be immediately forwarded to the medical practitioner, as required by Rule E 20 (4).

Lydia Scott, that being in attendance as a midwife at a confinement, she did not take the patient's temperature at any time, and the patient suffering from rigor, with raised temperature, and from abdominal pain and swelling, she did not explain that the case was one in which the attendance of a registered medical practitioner was required, nor did she hand to the husband or the nearest relative or friend present the form of sending for medical help, properly filled up and signed by her, in order that this might be immediately forwarded to the medical practitioner. as required by Rule E 20 (4).

Mary Ann Wilson, that being in attendance as a midwife at a confinement, she left the patient after the second stage of labour had commenced, in contravention of Rule E 6. The child having been born in her absence, she did not visit the patient until about six hours later, when she handed her over to the charge of an uncertified woman and ceased further attendance on the case. That when attending her patients she did not wear a clean dress of washable material, as required by Rule E 1, and that she habitually neglected to attend to the comfort and cleanliness of the mother and child during the lying-in period, as required by Rule E 11.

Midwives Censured.

The following midwives were censured after charges against them had been considered: *Jane Brook*, *Mary Ann Preece*, and *Mary Ann Southern*.

Midwife Cautioned.

Jane Sillito was cautioned after charges against her had been considered.

National Insurance.

THE ADVISORY COMMITTEES AND THE COMMISSIONERS.

CONFERENCE OF COMMISSIONERS WITH MEDICAL MEMBERS.

THE conference between the medical members of the Advisory Committees and the Joint Committee of Insurance Commissioners assembled at 11.30 a.m. on Friday, May 31st, and after sitting until 4.30 p.m. adjourned until Tuesday, June 11th. Sir Robert Morant, Chairman of the Board of Insurance Commissioners for England, was in the chair.

The proceedings, we understand, were of a somewhat informal character, the medical members being invited to express individual opinions upon various points; these opinions were noted by the Commissioners, who, however, did not announce the views which they had formed upon these points.

In a printed document the Commissioners invited opinions upon the question whether a uniform method of remuneration should be prescribed for adoption by Insurance Committees throughout the country, or whether local option should be permitted. There was a general agreement that local option should be permitted, and that the Commissioners should frame model rules. The three varieties of schemes which the Commissioners considered possible were (1) on a capitation basis, (2) on a pooling and payment per attendance basis, and (3) on a mixed basis, allowing special arrangements to be made in sparsely populated and extensive areas such as occur in the Highlands of Scotland.

During the discussion on this point it was stated on behalf of the British Medical Association that it desired that the medical profession in the locality should have the right to determine the basis which it desired put in operation in the particular district. The Commissioners invited members of the Advisory Committees to submit schemes under the various heads for consideration. Questions arising as to the preparation and publication of lists of doctors in each locality were also discussed, and it was generally agreed that the insurance areas should be conveniently small, and that local medical committees should be asked to assist in their delimitation. In connexion with this matter, the question of border districts arose, and it seemed to have been generally felt that any difficulty on this head could easily be overcome by authorizing a medical practitioner residing in such a district to cause his name to be inscribed on the panel for each district. In this connexion there arose also the question of mileage, and this led on to the consideration of another paper drawn up by the Commissioners dealing in quite general terms, among other matters, with the definition of what constituted ordinary medical attendance. Attention was directed to the question of hours of ordinary attendance to be given in the surgery, to night visits, and to visits made in response to a request received by the medical man after his usual hour for starting on his daily round.

The question of certificates also was raised, and it was pointed out that medical men should not be required to give any other certificate than that for the use of the approved society to which the insured person belonged, and that the provision of certificates for other societies or any other purpose should be a matter for special arrangement. The nature of the records which medical men serving on the panel could be expected to keep was also discussed. It was pointed out that the keeping of such records as it appeared had been suggested to the Commissioners might be necessary would involve a great deal of work which medical men could not be expected spontaneously to undertake, and generally the opinion was expressed that any clerical work required in excess of that now habitually done should be paid for by extra fees. The question of assistants and as to whether the assistant's name should go on the panel was also discussed in a somewhat desultory manner.

The principle that special visits and night calls and treatment in difficult and urgent cases must be remunerated by extra fees was discussed, but the Commissioners gave no indication of the source from which it was proposed that such remuneration should be provided.

SCOTLAND.

PARLIAMENTARY GRANT FOR SANATORIUM PURPOSES.

THE Local Government Board for Scotland has had under consideration those sections of the National Insurance Act that deal with the prevention and treatment of tuberculosis. It has now issued a circular to county councils, town councils, and district committees dealing with the powers and duties of local authorities.

Sanatorium Benefit and Treatment.

As was pointed out in the circular recently issued by the Scottish Insurance Commissioners (SUPPLEMENT, June 1st, p. 584), the Insurance Committees, when appointed, will be under obligation to make arrangements with local authorities and others for the treatment in sanatoriums and otherwise of all cases of tuberculosis occurring among insured persons. (Section 16 of the Act.)

It is important to note that the term "sanatorium benefit," as used in the National Insurance Act, covers every form of treatment, institutional and non-institutional, that can be applied to persons suffering from tuberculosis. An equally comprehensive meaning is given to the term "sanatorium treatment"; vide the interim report issued by the Departmental Committee on Tuberculosis (JOURNAL, pp. 1022–23, May 4th, 1912).

Special Powers and Duties of the Board.

Under the National Insurance Act it is the duty of the Board:

(*a*) To approve sanatoriums and other institutions for the treatment of tuberculosis under the management of persons or local authorities (other than Poor Law authorities) (Section 16).

(*b*) To approve the manner of treatment when such treatment is provided by persons or local authorities (other than Poor Law authorities) otherwise than in sanatoriums or other institutions, and to authorize local authorities to provide such treatment, including the appointment of officers for the purpose (Section 16).

(*c*) To distribute to county councils, town councils, and other local authorities and persons, with the consent of the Treasury, sums made available for the provision of, or making grants in aid to, sanatoriums and other institutions for the treatment of tuberculosis (Section 64 (1)).

(*d*) If a grant is made to a county council, the Board has power to authorize the County Council to provide sanatoriums and other institutions.

The Board recommends that county councils, town councils, and other local authorities should combine for the provision of sanatoriums and other institutions. The advantages of combination being economy, the administration would be more easily organized, and the cost of maintenance would be more easily diffused. Similar combinations exist under the Public Health Act. In framing orders for such combinations, the Local Government Board would have regard to the following:

(*a*) The specific requirements of the Insurance Committees, which are under obligation to make an arrangement for the administration of sanatorium benefit.

(*b*) The needs of the uninsured as well as the insured tuberculous persons in the given localities.

(*c*) The financial resources and populations of the combining areas.

(*d*) The extent to which these resources are already used for the prevention of tuberculosis.

(*e*) Any geographical conditions that have a bearing on administration, such as distance from populous centres.

(*f*) Any exceptional prevalence of tuberculosis.

(*g*) The conditions of industries and all other such circumstances as normally determine the amount of institutional provision required.

Special Powers and Duties of Local Authorities.

Under the National Insurance Act local authorities (including county councils if authorized) have power:

(*a*) To provide treatment in sanatoriums and other institutions for insured persons resident within and without their area (Section 16).

(*b*) To provide treatment for the dependants of insured persons resident within their area.

(*c*) To undertake, if so authorized by the Board, treatment, including the appointment of officers for the purpose, of insured persons and their dependants otherwise than in sanatoriums or other institutions (Sections 16 and 17).

(*d*) To combine for the purpose of providing sanatoriums and other institutions (Section 64 (3)).

The circular states that it should be unnecessary to remind local authorities concerned that the success of any scheme for the treatment of tuberculosis depends on the unremitting exercise of their powers under the Public Health Act. Any scheme for direct treatment must be based on the systematic improvement of the environment, the removal of nuisances, the prevention of overcrowding, enforcement of good ventilation, improvement of the milk supply, etc.

Treatment and prevention are so intimately associated that any comprehensive scheme must provide for both.

The attention of local authorities is specially directed to their powers under Section 66 of the Public Health (Scotland) Act, 1897, and, in particular, to the power of providing, furnishing, and maintaining convalescent homes and reception houses, and of supplementary hospital provision by a system of nursing and domiciliary treatment.

Scheme for the Organization of Treatment.

Under this head the circular draws attention to the Interim Report of the Departmental Committee on Tuberculosis, with special reference to establishment of dispensaries, hospitals, day and night camps, etc., and the appointment of a tuberculosis officer. It is pointed out that the duties of a skilled tuberculosis officer would be, first, to organize the methods of detecting and treating disease; secondly, to undertake or direct such treatment as may be arranged between the local authorities and the Insurance Committees; thirdly, to keep in constant touch with all such institutions and persons, including general practitioners, as are concerned in the treatment of tuberculous persons in the area of the local authority.

Finance.

The circular states that the Board entirely agrees with the recommendation of the Departmental Committee on Tuberculosis that, in erecting or adapting institutions, local authorities should avoid pretentious or extravagant buildings.

Before making a grant, the Board must be satisfied:

(*a*) As to the requirements of the area;

(*b*) As to the character of the provision proposed;

(*c*) As to the relation of such provision to any general scheme;

(*d*) As to whether the question of combination with other authorities has been adequately considered.

Preparation of Schemes.

With a view to the early preparation of adequate schemes for the prevention, detection, and treatment of tuberculosis, the Board suggests that in counties (including burghs of under 20,000 inhabitants) the county councils, and in burghs of more than 20,000 inhabitants the town councils, should forthwith instruct their medical officers of health to prepare a report on the requirements of the area of the county or town as the case may be. This report should include statements as to the means existing within the county or town for the treatment of tuberculosis, number of beds available in existing institutions, sanatorium beds being distinguished from other hospital beds, number of beds provided in shelters, at patients' homes, dispensary or other out-patient departments.

The recommendations referred to in the circular are based largely on the report of the Departmental Committee on Tuberculosis.

SCOTTISH MEDICAL INSURANCE COUNCIL.

A meeting of the executive of this Council took place in the Station Hotel, Perth, on May 29th. The meeting was largely attended, and Dr. WILLIAM RUSSELL presided.

The Advisory Committee.

With reference to the remit from the Council as to an undertaking being obtained from the medical members appointed directly by the Commissioners on the Scottish Advisory Committee that they should resign unless effect was given to the seven cardinal principles in the Regulations issued by the Commissioners, it was agreed that replies satisfactory to this Council had been received from all the members of the Advisory Committee with the exception of that from Dr. Norman Walker.

An offer of pecuniary assistance by a layman was considered. It was deemed inadvisable to accept pecuniary aid outside the profession.

Salaried Appointments under Insurance Commissioners.

The CHAIRMAN referred to the advertisement by the Scottish Commissioners of appointments for whole-time medical officers and of the warning notice issued by him on behalf of this Council, which action was cordially approved.

Commissioners' Invitation to Conference.

An invitation from the Scottish Commissioners desiring a conference on the question of appointment of medical members on Provisional Insurance Committees was submitted, and it was resolved that the Council decline to discuss this matter with the Commissioners until the seven cardinal principles have been accorded recognition by them. It was resolved to send the correspondence to the medical press.

National Health Insurance Commission (Scotland),
42, Frederick Street, Edinburgh,
27th May, 1912.

Sir,

The Scottish Insurance Commissioners are making arrangements for the setting up, at an early date, of Provisional Insurance Committees for the Counties of Scotland and for each Burgh in Scotland having over 20,000 inhabitants. Such Provisional Committees will hold office for a period not exceeding one year, after which they will be displaced by permanent Committees constituted under Section 59 of the National Insurance Act. The Commissioners propose that the Provisional Committees shall contain medical representation similar in character and amount to that provided for under the above Section, and they would be glad to have the benefit of a Conference with your Council or its Executive Committee on the question of appointments corresponding with those provided for by Subsection (2) (*c*). The following dates are suggested as suitable—namely, Monday, 3rd June, at any hour, or Wednesday, 5th June, at 4.30 p.m. I may inform you that on the latter date there will be a meeting of the Scottish Advisory Committee, when perhaps some of the members of the Scottish Medical Insurance Council may be present in Edinburgh.

I am to express the regret of the Commissioners at the short notice given, but to explain that the Insurance Committees must be set up at an early date, and that the Commissioners have found it impossible to give longer notice.

I am to add that the Commissioners would be obliged if you would kindly furnish them with a reply at your early convenience.

I am, Sir,
Your obedient servant,
(Signed) HENRY L. F. FRASER,
Assistant Secretary.

The Secretary,
Scottish Medical Insurance Council,
54, George Square,
Edinburgh.

Scottish Medical Insurance Council.

54, George Square, Edinburgh,
31st May, 1912.

Sir,

Your letter of 27th instant has been considered by a meeting of the Executive of this Council, and I am instructed to inform you that this Council has already organized a Medical Committee, selected by the medical practitioners in the respective areas, in nearly every insurance area in Scotland.

The demands of the profession are well known to the Commissioners, and as soon as these are frankly conceded in the Regulations, to be issued by the Commissioners, this Council will be prepared to advise or to take such steps as may be required for the election of medical representatives to the Provisional Local Insurance Committees.

Meanwhile, the Executive fails to see that there could be any practical outcome of a conference with the Commissioners on the point indicated.

I have to add that a copy of the letter from the Commission and of this reply is being sent to the medical press.

I am, Sir,
Your obedient servant,
(Signed) D. L. EADIE,
Secretary.

The Secretary,
National Health Insurance Commission (Scotland),
42, Frederick Street,
Edinburgh.

The Supplementary Pledge.

The meeting had under consideration questions arising in regard to friendly society practice.

It was resolved that this Executive should recommend every practitioner in Scotland to sign the new pledge of the British Medical Association and urge friendly society officers to sign the notice to resign when called upon by the Local Medical Committee, and that the Organization Committee be instructed to see that this is brought under their notice.

Organization Committee.

Dr. BUIST, Convener of the Organization Committee, reported that a large number of complete returns had been received from the different insurance areas, with particulars of (1) appointment of Provisional Medical Committees, (2) members who had signed undertaking, (3) views on wage limit, (4) remuneration, (5) members engaged in friendly society practice, and (6) members willing to resign clubs.

This Committee had resolved to meet on June 6th, to determine *inter alia* further representation of populous areas on the Council, provision for deputies, and to report upon returns.

Colliery and Works Committee.

Dr. EASTERBROOK, Convener of the Colliery and Public Works Committee, reported that the Executive Committee of the Scottish Colliery and Public Works Surgeons had now been dissolved in respect of this committee having been formed to look after their interests.

Powers were asked from the Executive to co-opt a sufficient number of members to represent so far as possible the colliery and public works interests of every county in Scotland where such interests exist.

It was resolved that this Committee strongly recommends every colliery and public works surgeon to sign the supplementary pledge issued by the State Insurance Committee of the British Medical Association, which pledge will apply to all colliery and public works practices the moment these practices come under the control of approved societies.

It was resolved to organize and hold at an early date a mass meeting of colliery and public works surgeons in Glasgow.

The Executive empowered the Committee to co-opt additional members.

Rural Practice Committee.

Dr. HAMILTON, Convener, presented the report of the Rural Practice Committee, which contained recommendations in regard to: (1) Mileage, (*a*) system of calculating, (*b*) remuneration; (2) maternity benefit—arrangement for attendance regarding mileage; (3) remuneration for night visits and arrangement for medicines.

Highlands and Islands Committee.

Dr. CURRIE, on behalf of Dr. Miller (Convener), presented the report of the Highlands and Islands Committee, which contained most interesting, useful, and helpful information bearing on the special peculiarities, complexities and difficulties, amounting in many cases to hardship and duress, which attend the carrying out of professional work amongst the sparse and isolated population of the north.

The reports of the Rural and Highlands and Islands Committees were remitted to the Organization Committee.

Officers.

Dr. Dewar and Dr. McKenzie Johnston were appointed Honorary Treasurers, and Mr. D. L. Eadie, 54, George Square, Edinburgh, Secretary.

Next Meeting.

The next meeting of the Executive was fixed to be held in Glasgow on June 15th.

IRELAND.

THE INSURANCE ACT AND THE MATERNITY HOSPITALS.

THE following resolution of the Faculty of Medicine of the Queen's University, Belfast, was unanimously adopted at a meeting held on May 28th:

That the Medical Faculty of the Queen's University of Belfast beg to draw the attention of the General Council of Medical Education and Registration of the United Kingdom to the fact that unless alterations are made in the National Insurance Act in reference to maternity hospitals, it will be impossible in the future to carry out the suggestions passed in 1907 by the General Medical Council in regard to practical midwifery, and which were adopted in full by the Queen's University of Belfast in their medical curriculum.

Under the Act a woman is deprived of "maternity benefit" if she is confined in a lying-in hospital, and payment of this benefit depends upon her being attended, either by a duly qualified medical practitioner or by a duly certified midwife. Consequently, whether an intern or an extern patient of a lying-in hospital, she will lose her "maternity benefit"; hence women (whether they are insured themselves or are the wives of insured persons) will naturally avoid maternities, with the indirect result that neither the midwife nor the medical man of the future will be able to acquire proper practical skill and experience.

The Medical Faculty of the Queen's University of Belfast would therefore respectfully urge the General Medical Council, in the interests of medical education, to take immediate action so as to safeguard the interests of such important educational institutions as maternities.

When the New Queen's University of Belfast was established, three years ago, the following suggestions, passed by the General Medical Council in 1907, in regard to practical midwifery, were adopted, and were made compulsory on students:

Every student shall be required either—

(*a*) To have regularly attended the indoor practice of a lying-in hospital or the lying-in wards of a general hospital for a period of three months; and after having received therein practical instruction in the conduct of labour, under the personal supervision of a medical officer, to have conducted twenty cases of labour under official medical supervision; or

(*b*) To have conducted not less than twenty cases of labour, subject to the following conditions:

That he has during one month given regular daily attendance upon the indoor practice of a lying-in hospital, or the lying-in wards of a general hospital or Poor Law infirmary, having a resident medical officer recognized for that purpose by the university; and that he has therein conducted cases of labour under the personal supervision of a medical officer of the hospital, who shall, when satisfied of the student's competence, authorize him to conduct outdoor cases under official medical supervision.

No certificate that the student has conducted the above-mentioned twenty cases of labour shall be accepted unless it is given by a member of the staff of a lying-in hospital, or of the maternity charity of a general hospital, or of a dispensary having an obstetric staff recognized for that purpose by the university, or of a Poor Law infirmary having a resident medical officer so recognized.

Every student before commencing the study of practical midwifery shall be required to have held the offices of clinical medical clerk and surgical dresser, and to have attended a course of lectures on surgery and midwifery.

Further, at the final M.B. degree examination of the Belfast University there is a clinical examination in obstetric medicine. Unless, however, the clauses in the present Insurance Act bearing upon "maternity" benefits be altered, it will be impossible to fulfil the regulations laid down by the General Medical Council; and hence the Medical Faculty of the Queen's University of Belfast has requested that body to urge that such clauses be changed. The first difficulty—that is, in relation to the intern maternity—might be met by making it clear to the poor that the "maternity" benefit will in all cases be paid to the woman's or her husband's dependants under Section 12 (2) (*a*) of the Act; while the second objection—in reference to the extern department of a lying-in hospital—might be obviated by arranging that women attended by medical students or pupil-midwives of a recognized maternity, under the direct supervision of the resident medical officer of the hospital, who, in turn, can command, if necessary, the services of the visiting medical staff, shall be regarded for the purposes of the Act as having been attended by a registered medical practitioner.

COUNTY INSURANCE COMMITTEES.

Early last April the medical men of North Tipperary met at Roscrea and formed themselves into a Provisional

Medical Committee. As similar committees have been formed elsewhere throughout Ireland under the auspices of the Conjoint Committee of the British Medical and Irish Medical Associations, and as the Irish Commissioners have come to the conclusion that they are thoroughly representative of the medical opinion in Ireland, the Commissioners have requested these committees to obtain lists of four names of doctors for each county who are willing to serve on the new County Insurance Committees, with a view to two of them being nominated by the Commissioners for each county. The North Tipperary Committee has now submitted four names to the Insurance Commissioners of doctors who are willing to go on the County Insurance Committee and help in any way they can. It is understood amongst the doctors that those expressing willingness to serve on this Insurance Committee will only act in the event of satisfactory terms being arranged with the profession as a whole for medical services under the Act. At the recent meeting of this Medical Committee it was announced that every medical man practising in North Tipperary, without exception, had joined, and had signed an undertaking only to take service on conditions approved by the Committee.

ENGLAND.

PROPOSED PROVISIONAL INSURANCE COMMITTEES.

Memorandum of Insurance Commissioners.

THE Insurance Commissioners for England have issued a memorandum on their proposal to institute provisional insurance committees for counties and county boroughs in England. The following is an abstract of the memorandum, supplied by the Commissioners:

Insurance committees are charged with many important duties, in particular the administration of sanatorium benefit, which must be undertaken as soon as the National Insurance Act comes into operation.

The final constitution of insurance committees, as prescribed by Section 59 of the National Insurance Act, cannot, however, be determined until the number of insured persons resident in each county or county borough and the respective numbers of members of approved societies and of deposit contributors have been ascertained. Inasmuch as no person can enter into insurance before July 15th, special arrangements have consequently to be made in order that insurance committees may be established by that date.

The Commissioners accordingly propose to exercise the powers conferred on them by Section 78 of the Act, and to make arrangements for the setting up of provisional insurance committees which will hold office until committees can be regularly constituted in accordance with the provisions of the Act.

So far as possible the number of members and the composition of the provisional committees will be based on the provisions of the Act, and the committees will be so constituted that there shall not be lacking any important element of the various kinds of experience which it is desirable should be comprised in the first committees.

The representation of insured persons will be secured mainly by utilizing the machinery at the disposal of the central organizations of friendly societies, trade unions, and industrial insurance offices for selecting suitable persons to be members of the committee. The other representatives of insured persons—for example, members of small societies and deposit contributors—will be selected by the committee itself.

The council of each administrative county and county borough has been invited to select representatives to the number of one-fifth of each committee, and steps are being taken with a view to obtaining the names of medical practitioners for inclusion on the committee.

The remaining members of each committee will be appointed by the Commissioners.

CIRCULARS BY INSURANCE COMMISSIONERS.

WOMEN CONTRIBUTORS.

THE Joint Committee of the National Health Insurance Commission has issued tables of reserve values for women (employed contributors and voluntary contributors who join within the first six months after July 15th under the age of 45). These tables show the amount which will be placed to the credit of the approved societies for each woman member. The table, as in the case of that previously issued for men, is so prepared as to make it equally advantageous to a society to take members at any age, although the rate of contribution is the same for all ages. The reserves credited to a society for married women joining as employed contributors are larger than those credited for spinsters or widows of the same age, since the society will have immediately to meet the additional cost of the sickness benefit which, in the case of insured married women, is paid concurrently with maternity benefit.

The Joint Committee has also issued draft regulations as to the accounts of approved societies, and two leaflets —one, entitled "How to Become Insured," applicable to women in the form of question and answer, and the other for domestic servants who are unmarried and under 21 years of age.

MEETINGS OF THE PROFESSION.

GREENWICH.

A MEETING of the medical men resident in the district of Greenwich was held on May 22nd. The chair was taken by Dr. ANNIS, and there were twenty-five present.

It was agreed that the local expenses should be met by a subscription of half a crown from each practitioner resident in the district, and Dr. Lovibond was appointed Honorary Treasurer.

The HONORARY SECRETARY explained that a local pledge had been issued and signed by nearly all those in actual practice in the district, but that since that date a pledge had been sent out by the Insurance Committee which, in the interests of the profession, it was necessary to sign.

The meeting was then addressed by Dr. A. H. WILLIAMS (Harrow), member of the Insurance and Advisory Committees. After some introductory remarks, he said: As you all know, we as a profession have for the last year or so been passing through a time of the greatest anxiety and danger. The extent of our danger was realized when the Insurance Bill was first published to the world a little more than a year ago.

Our difficulties in meeting the attack which this bill, as originally drafted, made upon us arose from several sources.

(*a*) There was the traditional want of unity and cohesion amongst the members of the profession. Our organization as a fighting force was far from complete.

(*b*) There was a want of mutual trust amongst us which was fostered by the excessive competition due to an overstocked profession.

(*c*) There existed in different parts of the country such extraordinarily diverse conditions in such matters as wages, standard of living, methods and rates of remuneration, etc., that it was difficult for a medical man in one part of the country to appreciate the conditions under which his medical brother might be working in another. For example, the medical man from one of the prosperous Lancashire towns where wages run to 7s., 8s., or 10s. a day, and where there are often several wage earners in a family, where house rent is cheap, where contract capitation practice is unknown, finds it very hard to understand the conditions so often found in the south of England, where large numbers of men earn 25s., 20s., or less a week, and out of this have to pay 6s. or 7s. rent for their cottages, and to keep their families on what is left. The well-to-do Lancashire workman may be able to pay good fees as per attendance, or he might be able to afford a capitation fee of 10s. for himself and every member of his family; but it is difficult to see how such a demand could be met by the poorer workmen of the south. Again, our united claim is for an income limit of £2 per week; but many tell us that this is far too high; whilst the colliery surgeons—a very large body of medical men—tell us with extraordinary unanimity that an income limit of any kind is quite an impossibility.

(*d*) Then again, as against our own internal troubles we had always in the past been faced with the wonderful organization and unity of the large and powerful friendly societies into which the workmen had banded themselves.

But the British Medical Association had been gradually learning lessons from the friendly societies. Our organization had been growing, and the introduction of the Insurance Bill was the last stimulus that was needed to convert us into a cohesive and potent fighting force.

At the end of May, last year, we were able to give out to the world, and to those responsible for this bill, a series of principles which the profession had agreed, with splendid unanimity, must be satisfied before we would undertake any work under the insurance scheme.

This unanimity had, however, not been achieved without certain compromises amongst ourselves. Extreme men in various directions had to give way; they had to come in to a point where the greater moderation of the demands enabled them to meet on common ground.

As an example, the colliery surgeons had to give up many ideas that they had come to consider essential to practice. One of their great difficulties was the income limit. They said quite definitely that with them the fixation of an income limit was an impossibility. But, though they form a very large section of the profession, they were prepared to sink their own views so as to make common cause with the rest.

But such concessions as these do not by any means dispose of the dangers of division for all time. For many men, though they may waive their own views, and for the time accept the views of the majority, have a way of returning to the charge again and again later on. This may be very creditable to their pertinacity and determination; but it is certainly a menace to unity of action and the solidarity of the profession as a whole.

The demands embodied in these cardinal principles are admitted to be moderate and reasonable by all disinterested persons. But there were certain points in them which had to be left somewhat vague. For example, the rate of remuneration could not be definitely stated till it was known what were the exact duties expected for this remuneration. Then the method of remuneration, whether by capitation fee or by payment per attendance, had to be left for local determination, as on this point the profession appeared to be almost evenly divided.

Before the Insurance Bill became an Act of Parliament the promoters of it had freely promised that it should provide for all insured persons such conditions of medical attendance as can only be secured by the hearty co-operation of the medical profession. And these promises had been rashly made and repeated again and again before this co-operation had been obtained. When our united demands were laid before the public it was found that, in spite of their moderation, some of them at least did not meet with the approval of those responsible for the bill. To provide against any danger from this source, therefore, there were inserted into the bill, at the last moment, certain loopholes through which those upon whom would devolve the working of the Act might either escape from their difficulties or might attack us. Vague and elastic powers were given to the Commissioners so that they might, under certain circumstances, either appoint whole-time medical officers to attend the insured, or they might even suspend the medical benefit. And though neither of these arrangements would provide a medical service such as had been promised again and again to the insured, nor one that would be satisfactory to them, it is certain that either would be very disadvantageous and distasteful to the medical profession as a whole.

The threat has been openly made by responsible persons that if we do not reduce our demands still more, and if we do not agree to accept whatever the Commissioners may think reasonable, the medical benefits will be suspended and the sum of 6s. per annum will be handed over to each insured person, so that he may make his own arrangements for medical attendance through the friendly societies. And it was pointed out that if our fight with the friendly societies had been troublesome in the past, it would be a much more difficult one in the future, when these friendly societies would have their membership more than doubled; when they would be receiving financial aid from the State and the employers; and when their prestige would be enhanced by the fact that they would be acting under the aegis of the State. This is the special danger that at the present time assails us. This has brought us to what is, perhaps, the most critical period of our trial. For now the time has come when the rank and file of the profession throughout the country must put into action in detail the principles of the pledge that was universally signed throughout the country little less than a year ago.

The loyalty of individual members will be tested by the threat of the loss of what may be a considerable part of their incomes; by the suggestion that others will take up their contract appointments; and by the bribe that they may get a little more than the miserable pittance hitherto paid for contract work.

If the rank and file of the profession throughout the country now fail to sign the pledge and to support the guarantee fund, and if owing to this we fail to obtain our just demands, it will be no use to raise the cry that we have been betrayed by our leaders, the Council or the Insurance Committee. The blame for the failure will then lie with the individual members of the profession.

It does not help the situation to say that we can stop the working of the Act till it has been amended to our liking. The Commissioners are compelled by what is now the law of the land to administer this Act. If they cannot provide the quality of medical attendance that was rashly promised to the insured they must provide the best that they can get. Now that that enormously powerful engine, a department of the State, has been set in motion, it will take more than a small stone to stop its working.

It is with a view to meeting the situation thus created that the State Sickness Insurance Committee of the British Medical Association has issued the new supplementary pledge and has asked for increased liberality in the support of the guarantee fund. These two schemes must go hand in hand. They work, as it were, in a cycle of interlocking circles. The more liberally that money is guaranteed, the more readily will the pledges be signed; for with a large fund to draw upon men will feel secure of an indemnity for any losses that they might suffer from giving up their present appointments. On the other hand, the more universally the pledges are signed, the more certain we are of victory—the less will be the loss to practitioners, and the less therefore the call on the guarantee fund. Thus with pledges well signed there will be confidence that very little of the amount guaranteed will ever be called up; and would-be guarantors will be encouraged to guarantee liberally and with a light heart.

The Pledge.

What the pledge aims at is to make it impossible for insured persons to obtain their medical attendance either through existing forms of underpaid contract practice or by a misuse of the out-patient departments of voluntary charities.

To achieve this the first clause provides that present holders of contract appointments shall resign these appointments *in so far as they apply to insured persons.* The second clause provides that any appointments so given up should not be taken by other medical men; and that no new similar appointments should be made without the sanction of our central authority. The third clause aims at preventing insured persons from obtaining ordinary medical attendance through the out-patient departments of voluntary hospitals.

Our Insurance Committee has been severely criticized for this pledge from curiously opposite standpoints. Some tell us that the pledge is not nearly stringent enough. To these we say that it would be no use our sending out a pledge which would be so unfair or so irksome to a large section of the profession as to make it certain that they would not sign it.

Others tell us that the pledge is far too drastic—that it is syndicalism in its worst form, and that it is degrading to an honourable profession. To these I would say that it is not syndicalism. We are not calling for a general strike. We are leaving the uninsured to obtain their treatment exactly as before. But that we do demand—and we have a right to do so—that the insured, who are being assisted by the State and by their employers, shall not in future obtain their medical attendance under the degrading conditions existing in the past. This demand is no disgrace to the honour of the profession, but quite the reverse.

Those who say that this pledge, from its drastic nature, would have unpleasant results, I would remind that the pledge is only to be brought into action if and when open war is declared. That it will be to the war and not to the pledge that the unpleasantness will be attributable. War cannot unfortunately be waged without unpleasantness. If this pledge is to be of any use it must be sufficiently strong to inflict injury on those opposed to us. It is no use to go into battle with beautifully burnished and embossed weapons which are incapable of harming the enemy.

I may here remark that the mere publication of this pledge has already done good. It may be noticed that there has been a change in the tone adopted by the Chancellor towards us. And one hears that the leaders of the friendly societies are in a state of alarm at the steps we have taken.

Difficulties in Signing.

To the holder of contract appointments who may depend on them for a large part of a not too generous income it may well be a serious matter to sign the form of resignation. However miserable the pay he cannot lightly contemplate its loss.

But what does he really stand to lose? He has the promise of the Insurance Committee that his resignations will only be used if and when there is a fairly certain chance that they can be used with success, and when the chance of others taking his appointments has been reduced to a minimum.

If the signing of these pledges has been at all unanimous, we must get the greater part, if not all, of our demands. This means that the fees received from this class of practice will be considerably higher than in the past.

If the holder has treated his patients at all well in the past, he, being the man now in possession, will retain the greater number of them still as his individual patients; and the higher rate of pay will more than compensate him for the loss of a few malcontents. Then, again, there are a large number of more or less healthy individuals who in the past have not thought it worth while to belong to any club, and who have probably been in the habit of obtaining what little medical attendance they have required gratuitously from some hospital. These men will now be forced by the Act to pay for their medical attendance. Their contributions will have to go to some medical man, and the holder of present appointments will have as good a chance of obtaining his share of them as any one else.

No! If the pledge is well signed, the chances are greatly in favour of the signatories making a gain rather than a loss. And in the unlikely event of there being a loss, there is still the guarantee fund from which compensation may be obtained if need be.

Some men may demur at the idea of giving up what has been a monopoly to them in the past. To these I would say that a year ago the profession unanimously decided that these monopolies must go, as that was the only way in which the tyranny of the friendly societies could be broken. We cannot now go back on that—which was one of the famous six points.

To put the whole matter shortly, it comes to this: We must either trust our friends—that is, our medical brethren and our State Sickness Insurance Committee, and sign the pledge; or, if we do not sign the pledge, we must put ourselves confidingly into the hands of those whom, so long as this fight continues, we must consider the enemy—namely, Mr. Lloyd George, Mr. Masterman, and the Commissioners.

In the first case we have every chance of gaining our demands, but in the second we are defeated in detail and will have to take whatever the Commissioners choose to give us. Can any one hesitate as to which is the wiser course to take?

Some holders of provident dispensary appointments hesitate to resign them on account of the hardship to the women and children. My reply to that is that after this Act comes into force there will no longer be any necessity for the insured to belong to a provident dispensary, as they will be provided for under the Act. And if it is then made a rule of the dispensary that insured persons are ineligible there will be no necessity for the appointment to the dispensary to be resigned.

The Guarantee Fund.

What is hoped for is that every medical practitioner will guarantee at least £10. Of this £1 is asked for at once; the rest will only be called for if and when it is required, and then not more than 20 per cent. at a time.

The fund is to be used (*a*) to defray the expenses of organizing the campaign in our defence, and (*b*) to provide, if necessary, compensation for those who have suffered pecuniary loss from their loyalty to their medical brethren.

For the first object only a comparatively small proportion will be required. Probably £1 per man will more than cover it.

With regard to the second object, the assertion has been widely made that the fund could not be used for the purpose proposed. But this is certainly untrue. We have the opinion of very eminent counsel that there is no doubt at all that it can be so used. The fund is no part of the ordinary funds of the Association, but is a voluntary fund, subscribed for a special purpose, and merely placed in the hands of the Council as trustees.

But in any case, if the pledges are well signed—and everything now points to that being done—I look upon this part of the fund as merely a big flag to wave in the face of the enemy. With universal loyalty amongst ourselves there will be little or nothing to be paid in the way of compensation. But at £10 a man, the £300,000 on paper would be a very fine flag to carry into battle. It would make even a bold enemy hesitate. It is not much, then, to ask every medical man, in defence of the interest, honour, and livelihood of himself and his fellow practitioners, to subscribe £1 and to guarantee a further £9 on which there is little chance of any call being made.

In conclusion, I ask every medical man to sign the pledge and to subscribe liberally to the guarantee. If that is done the victory is ours. We shall gain our just demands with our honour saved and with little cost to our pockets.

[A hearty vote of thanks was proposed to Dr. Williams, and a number of those present signed the pledge and handed in resignations of clubs.]

PROVISIONAL MEDICAL COMMITTEES.

Chelsea.

A MEETING was held at the Fulham Town Hall on May 29th. Dr. YOUNG was in the chair, and the following were present: Drs. Spaull, Coltart, Fletcher, Satchell, E. W. Lewis, A. Millar, Lee, Bonney, Benham, Ross, Hudson, Orr, W. Keen, Williams, and Gallard.

Dr. Hamilton wrote apologizing for his inability to be present.

The minutes of the last meeting were read and confirmed.

A letter was read from the Deptford Provisional Medical Committee thanking this committee for its congratulations on the results of the canvass there.

Dr. LEE moved and Dr. FLETCHER seconded the following resolution:

> That no person be eligible to act as a member of the Chelsea Provisional Medical Committee who has not signed and handed in his or her supplementary pledge and also his or her resignations of any club appointments which he or she may hold, as advised by the Council of the British Medical Association, and that the names of any of the present existing members of this committee who have not on or before our next meeting of the 29th inst. so signed and handed in the supplementary pledge and resignations be forthwith removed from the list of members, and such person forfeit his membership.

This was carried.

The canvassing lists were then amended, after a scrutiny of the recent returns by the subcommittee, and small deputations were appointed to approach those who had failed to sign the supplementary pledge, etc. The Secretary was directed to write a member of the committee who was absent and remind him that he had not yet signed the pledge nor had he forwarded any report of his canvass.

Dr. SPAULL moved, it was seconded and carried unanimously:

> That Dr. A. G. Wells be co-opted a member of this committee.

Dr. SPAULL moved and Dr. FLETCHER seconded the following resolution:

> That should the negotiations at present taking place between the Insurance Commissioners and the Association break down, this committee will place a scheme for a Public Medical Service before a general meeting of the whole profession of the district at the earliest possible date.

Dr. BONNEY was of opinion that it would be more appropriate to submit this resolution to a meeting of the Chelsea Division. Several members continued the discussion, and eventually the resolution was passed by a large majority.

The CHAIRMAN expressed the opinion that the names of all the medical men who had signed the supplementary

pledge should be read at the next meeting of the Division. Another member thought it would be better to read out the names of those who had not signed it.

Hammersmith.

Dr. P. C. RAIMENT, Honorary Secretary, has sent the following report of a canvass of the Hammersmith district of the Kensington Division for publication:

Practitioners resident in borough	80
Signed pledge	75
Not yet canvassed	1
Refused to sign pledge	4
Number of men holding contract appointments ...	29
Number of resignations of contract appointments ...	29

Of the four who have definitely refused to sign the pledge only one is in active practice, the balance being made up of men holding official positions who would not operate the Act in any case.

Willesden.

A meeting of all the medical men residing in the urban district of Willesden was called for Thursday, May 30th, and was held at St. Gabriel's Hall, Cricklewood. Between forty and fifty attended.

It was proposed and carried unanimously that Dr. CORAM JAMES should take the chair.

Dr. MACEVOY appealed to the members of the medical profession to unite with those in other parts of the country to sign the complementary undertaking and subscribe to the guarantee fund, so as to insure that the working of the National Insurance Act shall be in accord with the wishes of the whole profession.

It was proposed, seconded, and carried unanimously:

That a Provisional Medical Committee for Willesden should be formed to ascertain the opinions of medical practitioners and to determine what attitude shall be adopted towards the National Insurance Act in this district.

It was decided that the committee shall consist of 23 members, including chairman, vice-chairman, and honorary secretary.

Dr. MACEVOY proposed and Dr. STOCKER seconded:

That the Executive of the Willesden Division of the British Medical Association should be elected *en bloc* as the nucleus of the committee.

This was carried *nemine contradicente.*

It was proposed:

That the remaining 7 should be elected from among non-members of the British Medical Association.

After some discussion this proposal was by permission withdrawn. The ballot resulted in the election of all 7 non-members.

The committee elected are as follows: Dr. Coram James (Chairman), Dr. Macevoy (Vice-Chairman), Dr. Soden (Honorary Secretary), Drs. Armitage, Bindley, Cardinall, Whitehall Cooke, Crone, Macauley, Anderson Smith, Smurthwaite, Carson Smyth, Rawes, Rutherford, Skene, Traylen, F. C. Evans, Felce, A. Jones, Mechan, Muller, Turner, and Walker, the last 7 not being members of the Association.

It was decided:

That membership of the committee shall not continue for longer than one year without re-election, and that a general meeting of the local profession shall be called whenever the committee think necessary or on a requisition signed by any 7 members of the profession in the district.

Nottingham.

A meeting of the profession of the city and county of Nottingham was held on May 22nd. A Provisional Committee was appointed for the city and county respectively.

Oxford.

The Oxford Provisional Medical Committee met before the General Meeting of the Oxford Division held on May 31st (see p. 621), and drew up their report. They then adjourned until after the meeting, when they met to discuss arrangements for obtaining signatures to pledges and resignation.

South Staffordshire.

A meeting of this Committee was held on May 31st in the Bell Library General Hospital. Dr. MACTIER as convener took the chair. On the proposal of Dr. CRAIG, seconded by Dr. RIDLEY BAILEY, Dr. MALET was unanimously elected Chairman. Dr. Mactier thereupon vacated the chair, which was taken by Dr. Malet. Dr. RIDLEY BAILEY proposed, and it was seconded by Dr. SOMERSET and unanimously resolved, that Dr. Mactier be elected Honorary Secretary.

The minutes of the meeting of May 22nd were then read and confirmed.

Apologies for non-attendance were received from Drs. Deanesly and Cholmeley.

It was proposed by Dr. MACTIER and seconded by Dr. CRAIG:

That this meeting desires to express its deepest sympathy with Mr. Cholmeley in his recent bereavement.

This was carried unanimously.

The Committee then considered the list of the members of the profession showing those who had signed the supplementary pledge and those who had subscribed to the guarantee fund, and since Dr. MACTIER pointed out that only a certain number had yet been given the pledge for signature, it was decided, on the proposition of Dr. CRAIG, seconded by Dr. CRIDLAND:

That a circular be sent to those members of the profession who have not signed, by post, and also the circular letter drafted by the Central Office to those who have not guaranteed, and a copy of the pledge and a guarantee form be enclosed, and that a reply be requested within seven days.

The members present were: Dr. Malet (Chairman), Drs. Somerset, Hartill, Carter, Magrane, Galbraith, Cooke, McMillan, Stockwell, Codd, Ridley Bailey, Craig, Mactier, Edge, Clendinnen, and Cridland.

MEETINGS TO BE HELD.

WANDSWORTH.—A meeting of the medical profession will be held at the Drill Hall, 27, St. John's Hill, Clapham Junction—telephone Putney 89—(by kind permission of Lieutenant-Colonel Lord Herbert Scott, D.S.O., Officer Commanding), on this day (Friday), June 7th, at 3.30 p.m. All medical men in the district are invited to attend. Agenda: (1) Formation of a Public Medical Service. Dr. E. B. Turner (member of State Sickness Insurance Committee and of Advisory Committee), and Dr. T. A. I. Howell have been invited to speak on the advantages of a Public Medical Service—(*a*) In the event of our accepting service under the Insurance Act; (*b*) In the event of our *not* accepting service under the Insurance Act. Dr. H. B. B. Greene will propose, and Dr. R. Carswell will second, the following resolution: "That this meeting of the medical profession do approve of the establishment of a Public Medical Service, organized and managed solely by the medical profession, and urge the Provisional Medical Committee to at once proceed to its realization." (2) Report of Provisional Medical Committee. The Honorary Secretary will make a brief statement of the work done by the committee. Dr. E. B. Turner will explain the situation in regard to the Insurance Act. (3) Treasurer's report. (4) Other business.—J. KENNISH, Honorary Secretary.

CORRESPONDENCE.

CAN THE DOCTORS WORK THE INSURANCE ACT?

WE have received for publication the following communication:

Sir,—The Halifax Provisional Medical Committee has ordered, at its own expense, fifty copies of Dr. Lowry's book, *Can the Doctors Work the Insurance Act?* for distribution amongst the lay members of the local Insurance Committee.

In our opinion this book so lucidly presents the views of a large majority of the profession that its distribution should do much to convince laymen of the justice of our case, and so lighten the work of the local Medical Committees in their negotiations with the local Insurance Committees in the event of our consenting to work the Act.

We would strongly recommend other local Provisional Medical Committees to make a similar distribution of the book.—We are, etc.,

PRIESTLEY LEECH, M.D., B.S.Lond., F.R.C.S.Eng.,
Chairman, Halifax Provisional Medical Committee.

J. CROSSLEY WRIGHT, M.A., M.B.,
Chairman, Halifax Division, British Medical Association.

J. F. GILL, M.B., Ch.B.,
Honorary Secretary, Halifax Division, British Medical Association.

J. F. HODGSON, M.D., D.P.H.,
Honorary Secretary, Halifax Provisional Medical Committee.

Halifax, June 3rd.

THE SUPPLEMENTARY PLEDGE.

University College Hospital: A Correction.

Mr. RAYMOND JOHNSON (Chairman of the Medical Committee, University College Hospital) writes: I shall esteem it a favour if you will allow me this opportunity of correcting an erroneous statement which appears in the SUPPLEMENT of June 1st, p. 578.

In the report of a discussion on the National Insurance Act which took place at a meeting of the practitioners of St. Pancras and Islington on May 24th it is stated that "the staff of the University College Hospital has signed the pledge to a man." This is not the case.

The matter has been fully discussed at a meeting of the Medical Committee, at which a resolution was passed to the effect that the committee was in entire sympathy with the policy of the British Medical Association, as expressed in the complementary pledge. The question is now under consideration by a subcommittee of representatives of the General and Medical Committees.

Dr. B. G. MORISON (late Chairman, St. Pancras and Islington Division) writes: Will you permit me to rectify an inaccurate statement, for which I am responsible and which occurs in the report of a meeting of the St. Pancras and Islington Division, given in the SUPPLEMENT of June 1st? It is to the effect that "the staff of University College Hospital has signed the pledge to a man." This statement, which was founded on my misunderstanding of a communication made to me at the meeting in question, is incorrect. I have since learnt that the staff of this hospital has not signed the pledge, and that the question of signature is still under consideration. I should like to add that I would be most unwilling to push decision in this matter, and the more so that I entertain no doubt that the staffs of hospitals, whether by expressed adhesion or not, are fully in accord with the profession as a whole in its present controversy with the Government.

Vital Statistics.

THE REGISTRAR-GENERAL'S QUARTERLY RETURN.

[SPECIALLY REPORTED FOR THE "BRITISH MEDICAL JOURNAL."]

THE quarterly return of the Registrar-General relating to the births and deaths in the first quarter of the year, and to the marriages during the three months ending December last, has just been published. In the present issue the tables of births and deaths in the several registration districts and subdistricts, hitherto included in the return, have been discontinued in view of the alteration in the system of tabulation adopted as the basis of the arrangement in the Registrar-General's Annual Report; in future this report will show the births and deaths according to the administrative area in which the deceased person or the parents of the newly born child were resident.

The 222,589 births registered in England and Wales during the period under notice were equal to an annual rate of 24.4 per 1,000 of the population, estimated at 36,539,636 persons in the middle of the year; this birth-rate is 2.9 per 1,000 below the average for the corresponding quarters of the ten preceding years, and is the lowest rate recorded in the first three months of any year since civil registration was established. The birth-rates in the several counties ranged from 17.9 in Sussex, 18.2 in Carnarvonshire, 19.2 in Dorsetshire and in Somersetshire, and 19.7 in Devonshire to 27.3 in Northumberland, 27.6 in Carmarthenshire, 28.9 in Staffordshire, 30.6 in Glamorganshire, 31.1 in Durham, and 31.2 in Monmouthshire. In ninety-four of the largest towns the birth-rate averaged 25.7 per 1,000, in London the rate was 25.8, while among the other towns the lowest rates were 15.4 in Hastings, 15.7 in Bournemouth, 15.9 in Southport, 16.2 in Blackpool, 16.6 in Hornsey, and 16.7 in Ilford; and the highest rates were 32.5 in Sunderland, 32.7 in Barnsley, 33.2 in Middlesbrough, 34.2 in Stockton-on-Tees, 34.4 in St. Helens, and 35.0 in Rhondda.

The excess of births over deaths during the quarter was 77,957, against 68,281, 85,286, and 80,455 in the corresponding quarter of the three preceding years. From a return issued by the Board of Trade it appears that the passenger movement between the United Kingdom and places outside Europe resulted in a net balance outwards of 47,819 English passengers, 1,003 Welsh, 10,318 Scottish, 3,141 Irish, and 11,599 of foreign nationality, while among British Colonial passengers the arrivals exceeded the departures by 951; the balance of the aggregate passenger movement to and from all countries was 58,172 outwards.

The deaths registered last quarter in England and Wales numbered 144,632, and were equal to an annual rate of 15.9 per 1,000, or 1.6 per 1,000 below the average for the ten preceding first quarters. The lowest county death-rates last quarter were 11.6 in Middlesex, 12.4 in Essex, 13.1 in Surrey, and 13.3 in Sussex; the highest rates were 17.5 in Norfolk, 18.1 in Carnarvonshire, 18.2 in Cumberland, 18.3 in Lancashire, and 1.8 in Staffordshire. In ninety-four of the largest towns the rate was 16.2 per 1,000: in London it was 15.3 per 1,000, while among the other towns the rates ranged from 9.3 in Southend, 9.4 in Ilford, 10.8 in Hornsey, in Walthamstow, and in Eastbourne, and 11.2 in Wimbledon to 20.5 in Manchester, 20.6 in Preston, 20.7 in Merthyr Tydfil, 20.8 in Salford, 21.9 in Dudley, and 24.2 in Walsall.

The 144,632 deaths from all causes last quarter included 2,926 that were attributed to whooping-cough, 1,986 to measles, 1,368 to diphtheria, 1,268 to diarrhoea and enteritis (among children under 2 years of age), 510 to scarlet fever, 425 to enteric fever, and one to small-pox; the average mortality from diarrhoea and enteritis among children under two is not available for comparison, but the mortality from each of the other diseases specified was below the deennial average.

The rate of infant mortality measured by the proportion of deaths among children under 1 year of age to registered births was equal to 114 per 1,000, or 14 per 1,000 less than the average rate for the ten preceding first quarters, and was lower than that recorded in the corresponding period of any year since 1870, the first year for which the information is available. Among the several counties the rates of infant mortality last quarter ranged from 70 in Herefordshire, 79 in Sussex, 83 in Wiltshire, 88 in Somersetshire, and 90 in Essex to 147 in Denbighshire, 149 in Cumberland, 154 in Staffordshire, 156 in Glamorganshire, and 184 in Carnarvonshire. In ninety-four of the largest towns the rate averaged 113 per 1,000, and ranged from 54 in Blackpool, 56 in Southend, 67 in Oxford, 69 in Enfield, and 73 in Hastings to 167 in West Bromwich, 172 in Dudley and in Great Yarmouth, 183 in Rhondda, 202 in Merthyr Tydfil, and 215 in Walsall.

The deaths among persons aged 1 to 65 years were at the rate of 8.3 per 1,000 of the population estimated to be living at this group of ages; in the ninety-four large towns the rate averaged 9.2 per 1,000, and ranged from 4.2 in Ilford, 4.9 in Lincoln, 5.0 in Hornsey, 5.2 in Southend, and 5.3 in Hastings to 13.0 in Manchester and in Oldham, 13.3 in Salford, and 13.5 in Walsall.

Among persons aged 65 years and upwards the death-rate was 114.6 per 1,000; in the ninety-four large towns the death-rate in this age-group averaged 126.2 per 1,000, and ranged from 72.9 in Edmonton, 80.7 in Southend, 81.1 in Eastbourne, 81.9 in Grimsby, and 84.1 in Aberdare to 177.0 in Bolton, 186.1 in West Hartlepool, 188.0 in Preston, 193.2 in Barrow-in-Furness, and 200.0 in Dudley.

The mean temperature of the air last quarter was above the average in all parts of the country; the rainfall for the quarter was largely in excess of the average; while the duration of bright sunshine was generally very deficient.

HEALTH OF ENGLISH TOWNS.

IN ninety-five of the largest English towns 8,666 births and 4,386 deaths were registered during the week ending Saturday, May 25th. The annual rate of mortality in these towns, which had been 13.9, 14.2, and 12.7 per 1,000 in the three preceding weeks, increased to 13.0 per 1,000 in the week under notice. In London the death-rate was equal to 12.3 per 1,000, against 13.7, 14.1, and 11.7 per 1,000 in the three previous weeks. Among the ninety-four other large towns the death-rates ranged from 4.6 in Cambridge, 5.8 in Oxford, 5.9 in Tottenham, 6.1 in Swindon, 6.4 in Darlington, and 6.7 in Bath to 18.5 in Stoke-on-Trent and in Manchester, 19.1 in Barnsley, 19.5 in Cardiff, 19.7 in Wigan, and 23.0 in Rotherham. Measles caused a death-rate of 1.5 in Bristol, 1.6 in Salford, 1.7 in Manchester, 1.8 in Gateshead, 1.9 in Dewsbury and in Merthyr Tydfil, 2.2 in Liverpool, 4.9 in Rotherham, 6.2 in Cardiff, and 7.7 in Ipswich; whooping-cough of 1.4 in Plymouth, in Smethwick, and in Stockport, 1.7 in Wigan, 2.1 in Gloucester, and 3.0 in Barnsley; and diphtheria of 1.3 in Swansea and 2.0 in Portsmouth. The mortality from scarlet fever and enteric fever showed no marked excess in any of the large towns, and no fatal case of small-pox was registered during the week. The causes of 32, or 0.7 per cent., of the total deaths were not certified either by a registered medical practitioner or by a coroner after inquest, and included 4 in Liverpool, 3 in Birmingham, and 2 each in Portsmouth, Bury, Manchester, South Shields, and Gateshead. The number of scarlet fever patients under treatment in the Metropolitan Asylum Hospitals and the London Fever Hospital, which had been 1,214, 1,242, and 1,213 at the end of the three preceding weeks, had risen to 1,231 on Saturday, May 25th; 182 new cases were admitted during the week, against 158, 168, and 146 in the three preceding weeks.

In ninety-five of the largest English towns 7,315 births and 4,270 deaths were registered during the week ending Saturday, June 1st. The annual rate of mortality in these towns, which had been 14.2, 12.7, and 13.0 per 1,000 in the three preceding weeks, fell to 12.6 per 1,000 in the week under notice. In London the death-rate was equal to 11.6 per 1,000, against 14.1, 11.7, and 12.3 per 1,000 in the three preceding weeks. Among the ninety-four other large towns the death-rates ranged from 4.4 in Ilford, 5.0 in Wakefield, 5.3 in West Bromwich, 6.2 in Southend-on-Sea and in Lincoln, 6.5 in Cambridge, and 7.2 in Croydon and in East Ham, to 16.7 in Stoke-on-Trent and in Manchester, 17.1 in Huddersfield, 17.5 in Nottingham, 17.6 in Birkenhead, 18.9 in Liverpool, and 23.8 in Rotherhithe. Measles caused a death-rate of 2.1 in Liverpool, 3.2 in Merthyr Tydfil, 5.1 in Cardiff, and 7.4 in Rotherham; whooping-cough of 1.3 in Salford, 1.6 in Birkenhead, 1.7 in Wigan, and 2.1 in Ipswich; and enteric fever of 1.1 in Bradford. The mortality from scarlet fever and diphtheria showed no marked excess in any of the large towns, and no fatal case of small-pox was registered during the week. The causes of 35, or 0.8 per cent., of the total deaths were not certified either by a registered medical practitioner or by a coroner after inquest, and included 9 in Birmingham, 4 in Liverpool, and 3 in Stoke-on-Trent. The number of scarlet fever patients under treatment in the Metropolitan Asylum Hospitals and the London Fever Hospital, which had been 1,242, 1,213, and 1,231 at the end of the three preceding weeks, had further risen to 1,245 on Saturday last; 155 new cases were admitted during the week, against 168, 146, and 182 in the three preceding weeks.

HEALTH OF SCOTTISH TOWNS.

IN eighteen of the largest Scottish towns 1,136 births and 644 deaths were registered during the week ending Saturday, May 25th. The annual rate of mortality in these towns, which had been 15.9 and 15.8 per 1,000 in the two preceding weeks, further fell to 15.4 in the week under notice, but was 2.4 per 1,000 above the rate recorded in the ninety-five large English towns. Among the several Scottish towns the death-rates ranged from 6.5 in Clydebank, 7.6 in Falkirk, and 7.9 in Hamilton to 18.9 in Coatbridge, 19.6 in Paisley, and 21.8 in Ayr. The mortality from the principal infectious diseases averaged 1.5 per 1,000, and was highest in Coatbridge and Partick. The 257 deaths from all causes registered in Glasgow included 2 from enteric fever, 5 from measles, 1 from scarlet fever, 5 from whooping-cough, 3 from diphtheria, and 3 from infantile diarrhoeal diseases. Eight deaths from measles were recorded in Partick, 5 in Coatbridge, and 4 in Paisley; 2 from scarlet fever in Greenock; and 4 from whooping-cough in Dundee, and 3 in Edinburgh.

In eighteen of the largest Scottish towns 1,146 births and 629 deaths were registered during the week ending Saturday, June 1st. The annual rate of mortality in these towns, which had been 15.9, 15.8, and 15.4 per 1,000 in the three preceding weeks, further fell to 15.0 per 1,000 in the week under notice, but was 2.4 per 1,000 above the rate recorded in the ninety-five large English towns. Among the several Scottish towns the death-rates ranged from 6.5 in Clydebank, 8.0 in Paisley, and 10.0 in Motherwell to 19.6 in Dundee, 20.1 in Coatbridge, and 22.5 in Kilmarnock. The mortality from the principal epidemic diseases averaged 1.4 per 1,000, and was highest in Dundee and Coatbridge. The 254 deaths from all causes registered in Glasgow included 7 from diphtheria, 6 from measles, 5 from whooping-cough, 3 from

scarlet fever, and 2 from enteric fever. Five deaths from measles were recorded in Dundee, 4 in Edinburgh, and 4 in Coatbridge; and 2 deaths from whooping-cough and 3 from infantile diarrhoea in Dundee.

HEALTH OF IRISH TOWNS.

DURING the week ending Saturday, May 25th, 646 births and 375 deaths were registered in the twenty-two principal urban districts of Ireland, as against 729 births and 412 deaths in the preceding week. The annual death-rate in these districts, which had been 20.2, 19.9, and 18.6 per 1,000 in the three preceding weeks, fell to 16.9 per 1,000 in the week under notice, this figure being 3.9 per 1,000 higher than the mean average death-rate in the ninety-five English towns for the corresponding period. The figures in Dublin and Belfast were 17.8 and 17.1 respectively, those in other districts ranging from 3.9 in Galway and 5.7 in Newtownards to 25.2 in Drogheda and 26.2 in Newry, while Cork stood at 17.7, Londonderry at 15.3, Limerick at 16.3, and Waterford at 19.0. The zymotic death-rate in the twenty-two districts averaged 1.5 per 1,000, as against 1.3 in the preceding period.

During the week ending Saturday, June 1st, 612 births and 399 deaths were registered in the twenty-two principal urban districts of Ireland, as against 646 births and 375 deaths in the preceding week. The annual death-rate in these districts, which had been 19.9, 18.6, and 16.9 per 1,000 in the three preceding weeks, rose to 17.9 per 1,000 in the week under notice, this figure being 5.3 per 1,000 higher than the mean average death-rate in the ninety-five English towns for the corresponding period. The figures in Dublin and Belfast were 19.1 and 14.9 respectively, those in other districts ranging from 4.3 in Lurgan and 5.1 in Clonmel to 45.8 in Newtownards and 46.1 in Queenstown, while Cork stood at 21.1, Londonderry at 12.7, Limerick at 20.4, and Waterford at 28.5. The zymotic death-rate in the twenty-two districts averaged 1.4 per 1,000 as against 1.5 in the preceding period.

Naval and Military Appointments.

ROYAL NAVY MEDICAL SERVICE.

SURGEON HUGH BERNARD GERMAN was on May 23rd permitted to withdraw from the service with a gratuity under the provisions of the Order in Council of April 1st, 1881.

ARMY MEDICAL SERVICE.

COLONEL LOUIS E. ANDERSON, to be Surgeon-General, dated May 4th, 1912.

Lieutenant-Colonel BRUCE M. SKINNER, M.V.O., from the Royal Army Medical Corps, to be Colonel, dated May 4th, 1912.

Lieutenant-Colonel ROGER KIRKPATRICK, C.M.G., M.D., from the Royal Army Medical Corps, to be Colonel, dated May 21st, 1912.

ROYAL ARMY MEDICAL CORPS.

THE undermentioned Captains to be Majors, dated May 29th, 1912: WILLIAM R. P. GOODWIN, WILLIAM L. STEELE, WILLIAM RIACH, M.D., JAMES C. KENNEDY, M.D., ARTHUR R. C. PARSONS, and EYRE W. POWELL.

Major H. SWABEY has been appointed to command the Section Hospital, St. Thomas's Mount.

Major I. A. O. MACCARTHY has been transferred from the London District to Hounslow.

Captain G. P. A. BRACHEN has been appointed to command the Station Hospital, Malappuram.

Captain W. B. PURDON has been appointed to command the Station Hospital, Cannanore.

INDIAN MEDICAL SERVICE.

LIEUTENANT-COLONEL J. LLOYD JONES has been granted privilege leave for two months and eighteen days, and, in continuation, furlough for four months and fourteen days, with effect from April 13th, 1912.

Lieutenant-Colonel E. H. WRIGHT has been granted privilege leave for two months from date of relief.

Major J. C. H. LEICESTER has been appointed Civil Surgeon of the Second Class, with effect from April 1st, 1912.

Major J. D. MEGAW has been appointed Civil Surgeon of the Second Class, with effect from April 1st, 1912.

Captain ANDERSON is posted as Residency Surgeon at Gwalior.

Captain F. A. BAKER, M.B., is granted privilege leave for two months and nineteen days, with effect from June 4th, 1912.

Captain BRIERLEY is posted as Civil Surgeon at Peshawar.

The services of Captain A. CAMERON, M.B., and Captain H. C. BUCHLEY, M.D., Plague Medical Officers in the Punjab, are replaced at the disposal of the Government of India, Department of Education.

Captain F. P. CONNOR on temporary plague duty at Gaya is granted combined leave for eighteen months.

Captain DRAKE has been appointed to officiate as Assay Master, Bombay, vice Lieutenant-Colonel Lloyd Jones on six months' leave.

Captain C. L. DUNN, officiating Deputy Sanitary Commissioner, 2nd Circle, is deputed to Amritsar to attend the malaria class.

The services of Captain F. C. FRASER, M.D., are replaced at the disposal of His Excellency the Commander-in-Chief in India.

Captain A. W. GREIG temporarily joins the Jail Department in the Punjab.

The services of Captain GRISEWOOD, Plague Medical Officer, Delhi, are placed at the disposal of the Chief Commissioner, Central Provinces.

Captain H. HALLIDAY, Civil Surgeon, Lyallpur, is transferred to Murree, from April 7th.

Captain E. J. C. MCDONALD, on being relieved of his duties as Officiating Civil Surgeon at Sibsagar, is appointed to be Supernumerary Medical Officer in Assam, and posted to Dibrugarh, and is appointed temporarily to hold charge of the Lakimpur Military Outpost at Rotung.

Captain J. M. A. MACMILLAN, M.B., Civil Surgeon, Hoshangabad, has been granted privilege leave for three months, with effect from May 17th, 1912.

Captain PIERPOINT has been appointed Agency Surgeon at Khyber.

The notifications dated March 27th, 1912, transferring Captain W. D. RITCHIE from Dhubri to Sibsagar, and Captain C. A. GODSON from Sibsagar to Gauhati, and appointing Captain J. F. JAMES to officiate as Civil Surgeon, Goalpara, are cancelled.

The services of Major E. L. WARD are placed at the disposal of the Director of Temporary Works, Delhi.

Captain R. T. WELLS, Plague Medical Officer, Jullunder, has been granted leave for six months from May 1st.

VOLUNTEER DEPARTMENT.

Surgeon-Lieutenant A. R. J. DOUGLAS, M.D., Burma Railway Volunteer Corps, has been granted leave for five months and fifteen days, with effect from April 25th, 1912.

TERRITORIAL FORCE.

ROYAL ARMY MEDICAL CORPS.

For Attachment to Units other than Medical Units.—VINCENT HOWARD (late Lieutenant Buckinghamshire Battalion, the Oxfordshire and Buckinghamshire Light Infantry), to be Lieutenant, dated May 29th, 1912.

CHANGES OF STATION.

THE following changes of station amongst the officers of the Army Medical Service have been officially reported to have taken place during April:

	FROM	TO
Lieut.-Colonel W. C. Beevor, C.M.G., M.B.	Fermoy ...	Dublin.
,, C. Birt	Dublin	London.
,, C. C. Reilly	R. Mil. Coll. ...	Colaba.
,, F. W. C. Jones, M.B....	Quetta	Meerut.
,, C. A. Lane, M.B. ..	Hounslow ...	Madras.
,, E. A. Burnside... ...	Bellary... ...	Bangalore.
,, A. P. Blenkinsop ...	R.A.M. Coll. ...	Simla.
,, A. J. Luther	Cahir	Fermoy.
Major A. W. Bewley	Meerut... ...	Ranikhet.
,, A. E. Smithson, M.B.	Pietermaritzburg	Ireland.
,, F. J. W. Porter, D.S.O.... ...	Cosham ...	Bellary.
,, A. G. Thompson, M.B.	Ferozepore ...	Pachmarhi.
,, F. A. Symons, M.B.	Cosham ...	Gosport.
,, H. W. Grattan	Lucknow ...	Naini Tal.
,, A. H. O. Young	Halifax ...	Strensall.
,, P. H. Collingwood	Devonport ...	Crownhill.
,, G. M. Goldsmith, M.B.... ...	Thayetmyo ...	Lebong.
,, G. J. A. Ormsby, M.D.	Dinapore ...	Landour.
,, J. J. W. Prescott, D.S.O. ...	Newcastle ...	Cosham.
,, H. S. Roch	York	Pretoria.
,, F. Harvey	Devonport ...	Okehampton.
,, O. W. A. Elsner	Pretoria ...	Pietermaritzburg.
,, F. G. Richards	—	Queenstown.
,, C. H. Straton	London ...	Pretoria.
,, B. F. Wingate	Secunderabad.	Wellington.
,, J. G. Churton	Peshawar ...	Bangalore.
,, J. P. J. Murphy, M.B.	Dover	Cape Town.
Captain W. S. Crosthwait	Fermoy ...	Clonmel.
,, J. T. Johnson, M.D.	Bareilly ...	Chakrata.
,, J. L. Jones	Netley	Secunderabad.
,, J. S. Bostock, M.B.	Agra	Ranikhet.
,, D. L. Harding, F.R.C.S.I. ...	Enniskillen ...	Belfast.
,, T. F. Ritchie, M.B.	—	West Africa.
,, A. W. Sampey	Warley... ...	Naini Tal.
,, N. E. J. Harding, M.B. ...	—	West Africa.
,, J. H. Duguid, M.B.	Tipperary ...	Calcutta.
,, H. T. Stack, M.B.	Bareilly ...	Ranikhet.
,, G. W. G. Hughes	Scarborough ...	Bradford.
,, G. F. Rugg	Quetta	Peshawar.
,, C. Ryley	Chatham ...	Shoeburyness.
,, H. C. Sidgwick, M.B.	Kingston-on-Thames	Woolwich.
,, C. R. Millar	— ...	London Dist.
,, R. G. Meredith, M.B.	Pontefract ...	Lichfield.
,, H. O. M. Beadnell	Ashton... ...	Chester.
,, G. G. Tabuteau...	Jhansi	Dublin Dist.
,, R. E. Humfrey, M.B.	,, ...	Curragh.
,, J. A. Anderson, M.B.	Bloemfontein	Scotland.
,, G. H. Rees, M.B.	Alexandria ...	Ireland.
,, E. G. Anthonisz	Cannanore ...	,,
,, R. A. Bryden	Bloemfontein	Hounslow.
,, W. J. Weston	Gibraltar ...	Ireland.
,, A. E. F. Hastings	Calcutta ...	E. Command.
,, M. J. Cromie	Kilbride ...	Dublin.
,, E. T. Potts, M.D.	—	,,
,, G. W. W. Ware, M.B. ...	Gosport ...	Dorchester.
,, W. C. Nimmo	Meerut... ...	Chatham.
,, T. S. Blackwell	Bhamo... ...	Belfast.
,, H. E. Priestley	Gibraltar ...	S. Command.
,, P. J. Marett	—	Gravesend.
,, J. S. Dunne, F.R.C.S.I. ...	Agra	E. Command.
,, T. C. C. Leslie	Maritzburg ...	Cork.
,, D. De C. O'Grady	Peshawar ...	Rawal Pindi.
,, J. A. B. Sim, M.B.	Bermuda ...	Edinburgh.
,, R. W. D. Leslie...	Malta	S. Command.
,, D. Coutts, M.B.	Allahabad ...	Ranikhet.
,, G. P. A. Bracken	Secunderabad	Malappuram.
,, W. J. E. Bell, M.B.	Golden Hill ...	Cosham.
,, A. H. Jacob	Attock	Rawal Pindi.
,, D. F. Mackenzie, M.B. ...	Dinapore ...	Darjeeling.
,, J. du P. Langrishe, M.B. ...	Kirkee	Colaba.
,, A. C. Elliott, M.B.	Campbellpore	Sialkot.
,, R. F. O'T. Dickinson ...	Bareilly ...	Landour.
,, T. S. Eves, M.B.	Lucknow ...	Benares.
Lieutenant S. S. Dykes, M.B.	,, ...	Dinapore.
,, W. H. O'Riordan	York	Rawal Pindi.
,, R. C. Priest, M.B.... ...	Allahabad ...	Lebong.
,, P. S. Tomlinson	Lucknow ...	Allahabad.
,, G. P. Taylor, M.B. ...	Glasgow ...	Pretoria.
,, A. W. Bevis...	Chatham ...	Bloemfontein
,, M. J. Williamson, M.B....	Tidworth ...	,,
,, C. L. Franklin, M.B. ...	Preston ...	Harrismith.
,, H. R. Edwards	Woolwich ...	Pretoria.
,, A. G. Jones, M.B.... ...	Oxford	Tidworth.
,, T. H. Dickson, M.B. ...	Curragh ...	Gibraltar.
,, R. M. Davies, M.B. ...	Chatham ...	Pretoria.
,, R. C. G. M. Kinkead, M.B.	Cork	Bloemfontein.
,, E. C. Stoney, M.B. ...	Bangalore ...	Secunderabad.
,, E. L. Fyffe, M.B.	Fermoy ...	Cork.
,, G. O. Chambers	Bradford ...	Lichfield.
,, W. S. R. Steven, M.B. ...	Woolwich ...	Hounslow.
,, C. D. K. Seaver	Fethard ...	Kinsale.
,, J. S. Levack, M.B. ...	Lichfield ...	York.
,, W. T. Graham, M.B. ...	Worcester ...	Tidworth.
,, L. Buckley, M.B.... ...	Aldershot ...	Bordon.
,, A. S. Heale	Cosham ...	Hilsea.

GENERAL COUNCIL
OF
MEDICAL EDUCATION AND REGISTRATION.

SUMMER SESSION, 1912.

Tuesday, June 4th, 1912.

Sir DONALD MACALISTER, K.C.B., President, in the Chair.

THE ninety-fifth session of the General Council of Medical Education and Registration began at the offices of the Council, 299, Oxford Street, on Tuesday, June 4th, 1912.

NEW MEMBERS.

The following new members were introduced:

Dr. Theodore Cash, as Representative of the University of Aberdeen, for five years from December 13th, 1911, introduced by Sir Thomas Fraser.

Dr. James Lorrain Smith, as Representative of the Victoria University of Manchester, for two years from May 8th, 1912, introduced by Dr. Caton.

Dr. George Alexander Gibson, as Representative of the Royal College of Physicians of Edinburgh, introduced by Mr. Hodsdon.

Dr. David Hepburn, as Representative of the University of Wales, for three years from May 18th, 1912, introduced by Dr. Latimer; and

Mr. T. Jenner Verrall, as Direct Representative for England, for five years from January 1st, 1912, introduced by Dr. Macdonald.

PRESIDENT'S ADDRESS.

Changes in the Council.

GENTLEMEN,—As on previous occasions, I have at the opening of this ninety-fifth session to begin my address with *Ave atque vale.* Our senior member, Sir John Batty Tuke, has retired after a quarter of a century of distinguished service; and another member, who joined us but three years ago, has suddenly passed away in the midst of his varied and important activities. Only those who, like myself, are among the seniors can fully appraise the value of Sir John's contributions to the educational and professional advances we have made during the last twenty-five years; but all alike have recognized his devotion to the public purposes for which the Council exists, and have been helped by his mature and independent judgement on questions of policy or practice. The qualities that marked him for eminence in professional life he freely applied to the business of the Council, and more than one department of its work was developed under his direction. The cordial good wishes of his colleagues will follow him in his well-earned retirement.

By the death of Dr. Dixon Mann, the Victoria University of Manchester loses an able and energetic teacher, the profession an acknowledged authority on medico-legal problems, and the Council a member of wide experience and forceful intellect. We remain his debtors for the part he took in remodelling the regulations for qualifications in public health, and share with many in unavailing regret for the untimely interruption of his services to medicine and the State.

In his place we welcome Dr. Lorrain Smith, F.R.S. The field of his professional experience, which includes England, Scotland, and Ireland, fits him in a special degree for effective membership of this Council of the United Kingdom. From Edinburgh, in the room of Sir John Tuke, we receive Dr. G. A. Gibson, formerly an Inspector of Examinations on the Council's behalf, a graduate of numerous universities on both sides of the Atlantic, and a leader in medical science and practice on both sides of the Border. He will find that his name is already familiar to the Council. The University of Wales, in virtue of a recent Act of Parliament, has appointed Professor Hepburn, Dean of the Medical Faculty at Cardiff, to be its first representative. The Council has already noted with satisfaction that the University of Wales proposes to require from its medical graduates a high standard of educational and technical attainment. Professor Hepburn's work in connexion with the upbuilding of the medical school in Cardiff has gone far to realize the university's ideals. The Council will follow with interest the progress of the movement towards higher professional education to which, with a laudable ambition to excel, the Welsh nation has thus committed itself.

Last November I intimated that Professor Cash, of the University of Aberdeen, and Mr. Verrall, the fourth member elected by the practitioners of England and Wales, were about to enter the Council. To-day they take their places among us. I may in your name assure them, and the other new members, that we are glad to share our responsibilities with them, and that we count with confidence on their effective co-operation.

The late Lord Lister.

Since we last assembled, Lord Lister, the most illustrious of our former members, has passed from life, full of years and of honours. At his funeral the nations of the world were united in offering their tributes of gratitude and veneration to his memory. The Council was represented in Westminster Abbey by the President and other members, and on its behalf the Executive Committee conveyed to Lord Lister's family a suitable expression of its sympathy. The Council will ever proudly cherish the recollection that the founder of antiseptic surgery was at one time enrolled in its membership.

The National Insurance Act.

The National Insurance Bill, which occupied much of our attention last session, has passed into law. A number of the Council's amendments, proposed in the interest of professional efficiency, which is also the interest of the public, were adopted in principle by the Government. But important questions of a like nature arise directly or indirectly from the provisions of the Act as it now stands, and it remains to be seen whether the powers conferred on the Insurance Commissioners suffice to ensure that these questions shall be solved in a satisfactory manner. At an early stage in their proceedings the Commissioners under the Act invited the Council to appoint representatives for the purpose of taking part, with many other bodies and persons, in an informal conference on the medical aspects of the scheme. It seemed to myself, and to the members I was able to consult, that the invitation indicated some misapprehension of the functions and procedure of the Council. The Committee on the bill had discharged the duties remitted to it when the bill became an Act. Further instructions could be given only by the Executive Committee or the Council itself, and neither was in session. It was therefore impracticable, in response to the invitation received, to procure the appointment of duly authorized representatives, and I informed the Commissioners accordingly. The proposed conference was afterwards postponed, and I am not aware that it has since been convened. Meanwhile, with the assistance of large and influential Advisory Committees, the Commissioners are preparing regulations for the administration of medical, maternity, and sanatorium benefits. These regulations must of necessity have a bearing on various matters which directly concern this Council, such as clinical and obstetrical instruction, the guarantees for efficient practice, and the exercise of professional discipline. It is therefore important that the Council should have an opportunity of considering the regulations from the point of view imposed upon it by its statutory responsibilities, and there is reason to expect that such an opportunity will be offered. The Council will probably think fit to arrange for the appointment of a special committee to study the operation of the Act, and of any regulations proposed to be made thereunder, with the object of safeguarding the educational and other interests which I have indicated.

Select Committee on Proprietary Medicines.

A Select Committee of the House of Commons has been appointed "to consider and inquire into the question of patent and proprietary medicines and medical preparations and appliances, and advertisements relating thereto; and to report what amendments, if any, in the law are necessary or desirable." The question has obvious relations to the work of the Pharmacopoeia Committee and of the Unqualified Practice Committee of the Council. In reply to an official invitation I have therefore suggested that Dr. Tirard, as an editor of the *Pharmacopoeia*, and Dr. Langley Browne, as Chairman of the Unqualified Practice Committee, should offer themselves as witnesses on the subject. Dr. Tirard has already appeared once before the Select Committee, but his evidence is not yet completed.

Canada Medical Act.

Information has reached me that the Dominion Medical Act of last year, due in great measure to the unwearying efforts of Dr. Roddick of Montreal, has now been adopted severally by each of the Provinces of Canada. Should this information prove correct, the way is at length open for the establishment of a Medical Register for the Dominion as a whole, and for the introduction of inter-provincial reciprocity in respect of medical qualifications and privileges.

These results have long been desired in this country as well as in Canada. In due time they will doubtless be followed by the application of Part II of the Medical Act (1866) to the Dominion, as it has now been applied to all the other possessions of the Crown in which medical qualifications are conferred. Already much has been done, at the instance of the Council, to promote uniformity of educational standard and equality of professional rights throughout the Empire. By the entrance of Canada into the federal relation, a necessary condition for the ultimate establishment of British (in the sense of Imperial) registration will have been fulfilled.

Registration in Ireland under Home Rule.

The programme of business contains a notice of motion that is of special interest in this connexion. It calls attention to the importance of maintaining the system of registration first established in 1858, a system which has made it possible to ensure uniformity of professional standards and privileges within the United Kingdom itself. It is accordingly suggested that in the Government of Ireland Bill, now under consideration by the Legislature, the power of altering the Medical and Dentists Acts should be reserved to the Imperial Parliament.

The Revision of the "Pharmacopoeia."

The Editors of the *British Pharmacopoeia* have been diligently occupied during the recess in preparing the draft text of the new issue. Two important sections of the work are now ready for detailed examination and revision by the Pharmacopoeia Committee. Committees of reference in chemistry and in botany have been appointed for purposes of consultation on points of scientific nomenclature, identification, and the like. During the summer special meetings of the Pharmacopoeia Committee will be held in order to accelerate the preparation of the text for press. By the incorporation of such portions of the *Indian and Colonial Addendum* as are proved to be serviceable, the new *Pharmacopoeia* will be adapted more fully than its predecessors to the varied requirements of the Empire at large.

Medical Education and Examination in India.

By courtesy of the Indian Government the Council has received much valuable information regarding the courses of study and examination required of candidates for the subordinate grades of the medical service in India. The Committees of the Council, and certain of the licensing bodies in this country, have hitherto found some difficulty in ascertaining necessary particulars concerning such candidates, when they apply for admission to examination in this country. As a result some differences of practice have arisen which it is desirable to obviate. The Joint Committee to which the question was referred in November will now report upon it for your information. In the meantime the officials at the India Office are considering methods by which the actual curricula and examinations taken by Indian candidates for British diplomas may be conveniently certified to the medical authorities here.

Legal Decisions on Medical and Dentists Acts.

Under instructions from the Executive Committee, Mr. Harper, as Solicitor to the Council, has prepared a volume containing reports of all the cases tried before the Superior Courts in which questions affecting the interpretation of the Medical and Dentists Acts were involved. Inasmuch as the powers and the gradually elaborated practice of the Council, as a tribunal, rest in large measure on judicial decisions given in connexion with these cases, Mr. Harper's careful and comprehensive digest will be of value not only to our members and officers, but to the public and the profession in general.

Registration of Students.

The Education Committee have considered what changes should be made in the regulations respecting the registration of students, and in those relating to the medical curriculum, in order to bring them into harmony with recent decisions of the Council. A report on the matter, and a revised statement of the Council's resolutions, will be laid before you.

The Curriculum.

In accordance with an understanding arrived at last November, a proposal will be submitted to you for defining the portion of the five years' curriculum which may be reckoned as already spent in medical study, in the case of registered students who have received instruction in the preliminary sciences at institutions other than recognized schools of medicine.

Finance.

I regret that the Finance Committee have to report a deficit on the accounts for 1911. This is in a large measure due to an exceptional cause, namely, the expense of repeated elections. As I have already pointed out, much of this expense might be avoided in future were certain slight changes made in the statutory regulations. There is ground for the belief that the Privy Council may be willing to assist us in procuring the necessary modifications. Meanwhile, it is satisfactory to observe that the business before the Council at the present session is not likely to call for any serious expenditure; and that, thanks to the careful preparation made by your officers and committees, the work in hand can be accomplished within the present week.

VOTE OF THANKS.

On the motion of Dr. LITTLE, seconded by Dr. NORMAN MOORE, a hearty vote of thanks was accorded the President for his valuable and lucid address, and it was ordered to appear on the minutes.

Vacancies and Appointments.

VACANCIES.

WARNING NOTICE.—Attention is called to a Notice (see Index to Advertisements—Warning Notice) appearing in our advertisement columns, giving particulars of vacancies as to which inquiries should be made before application.

BANGOR: CARNARVONSHIRE AND ANGLESEY INFIRMARY.—House-Surgeon. Salary, £100 per annum.

BIRKENHEAD: BOROUGH HOSPITAL.—Junior House-Surgeon. Salary, £80 per annum.

BIRMINGHAM INFIRMARY.—Three Assistant Medical Officers. Salaries from £104 to £120 per annum.

BRENTWOOD: ESSEX AND COLCHESTER ASYLUM.—Assistant Medical Officer. Salary, £150 per annum.

BRIGHTON, HOVE, AND PRESTON DISPENSARY.—Resident Medical Officer. Salary, £160 per annum.

BRISTOL GENERAL HOSPITAL.—House-Physician. Salary, £80 per annum.

BRISTOL ROYAL INFIRMARY.—Honorary Dental Anaesthetist.

CANCER HOSPITAL, Fulham Road, S.W.—House-Surgeon. Salary, £70 per annum.

CARMARTHEN: JOINT COUNTIES ASYLUM.—Second Assistant Medical Officer. Salary, £160 per annum, rising to £180.

CENTRAL LONDON EAR AND THROAT HOSPITAL, Gray's Inn Road, W.C.—(1) Resident House-Surgeon; salary, £50 per annum. (2) Registrar. (3) Clinical Assistants.

CHESTERFIELD AND NORTH DERBYSHIRE HOSPITAL.—House-Physician. Salary, £80 per annum.

COVENTRY AND WARWICKSHIRE HOSPITAL.—Senior House-Surgeon. Salary, £120 per annum.

DUBLIN: RICHMOND DISTRICT ASYLUM.—Junior Medical Officer. Salary, £120 per annum, rising to £200.

EDINBURGH HOSPITAL FOR WOMEN AND CHILDREN.—Medical Woman as Junior Resident. Honorarium, £12 per annum.

EDINBURGH: THE HOSPICE.—Medical Woman as Resident. Honorarium at the rate of £25 per annum.

FARRINGDON GENERAL DISPENSARY AND LYING-IN CHARITY, Bartlett's Buildings, E.C.—Resident Medical Officer. Salary, £100 per annum.

HARTLEPOOLS HOSPITAL.—House-Surgeon. Salary, £100 per annum.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—House-Surgeon. Salary, £30 for six months and £2 10s. washing allowance.

HUDDERSFIELD ROYAL INFIRMARY.—Assistant House-Surgeon. Salary, £80 per annum.

HULME DISPENSARY.—House-Surgeon. Salary, £160 per annum.

INVERNESS DISTRICT ASYLUM.—Junior Assistant Physician (Male). Salary, £150 per annum.

KING EDWARD VII HOSPITAL FOR WINDSOR, ETON, AND DISTRICT.—Resident Second House-Surgeon.

LEAMINGTON SPA: WARNEFORD GENERAL HOSPITAL.—House-Physician. Salary, £85 per annum.

LEEDS PUBLIC DISPENSARY.—Junior Resident Medical Officer. Salary, £100 per annum.

LIVERPOOL HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST.—Honorary Assistant Physician.

LONDON HOSPITAL MEDICAL COLLEGE.—Demonstrator in Physiology. Salary, £150 per annum.

MANCHESTER: ST. MARY'S HOSPITALS FOR WOMEN AND CHILDREN.—Resident Obstetric Officer. Salary, £100 per annum.

MARGARET STREET HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, W.—Honorary Physician.

MELBOURNE UNIVERSITY.—Chair of Veterinary Pathology and Directorship of the Veterinary Institute. Salary, £900 per annum, together with life insurance premium of £100.

MERTSHAM: NETHERNE ASYLUM.—Locumtenent for three-and-half months. Salary, 4 guineas a week.

NEW HOSPITAL FOR WOMEN, Euston Road, N.W.—Obstetric Assistant, Assistant Pathologist, and Clinical Assistant for Out-patient Department.

NEWPORT AND MONMOUTHSHIRE HOSPITAL.—Two Resident Medical Officers. Salary at the rate of £80 per annum, rising to £120 each.

NOTTINGHAM CHILDREN'S HOSPITAL.—Lady House-Surgeon. Salary at the rate of £100 per annum.

NOTTINGHAM GENERAL DISPENSARY (Branch).—Assistant Resident Surgeon (Male). Salary, £160 per annum.

OUGHTERARD UNION.—Medical Officer for the Cloonbar No. 2 Dispensary District. Salary, £100 per annum, increasing to £160. Successful candidate will also be appointed Medical Officer of Bundorrogha Dispensary District at salary of £39 per annum, and Medical Officer of Health for Cloonbar No. 2 District at salary of £12 per annum.

PRESCOT UNION.—Resident Assistant Medical Officer. Salary, £140 per annum.

PRINCE OF WALES'S GENERAL HOSPITAL, Tottenham, N.—(1) Junior House-Physician; salary, £60 per annum. (2) Honorary Surgical Registrar. (3) Honorary Anaesthetist. Honorarium of £20 per annum attached to (2) and (3).

QUEEN'S HOSPITAL FOR CHILDREN, Hackney Road, N.E.—Casualty Officer. Salary at the rate of £80 per annum.

ROYAL EYE HOSPITAL, St. George's Circus, S.E.—Junior House-Surgeon. Salary at the rate of £50 per annum.

ROYAL HOSPITAL FOR DISEASES OF THE CHEST, City Road, S.E.—Clinical Assistants in the Out-patient Department.

ROYAL WATERLOO HOSPITAL FOR CHILDREN AND WOMEN, S.E.—Senior Resident Medical Officer. Salary, £80 per annum.

ST. GEORGE'S UNION.—Second Assistant Medical Officer at the Infirmary. Remuneration, £130 per annum.

SHEFFIELD ROYAL HOSPITAL.—Sixth Resident. Salary, £60 per annum.

SHEFFIELD UNIVERSITY.—Demonstrator in Anatomy. Salary, £150 per annum.

STAFFORD: STAFFORDSHIRE GENERAL INFIRMARY.—House-Physician. Salary, £120 per annum, increasing to £140.

WEST LONDON HOSPITAL, Hammersmith Road, W.—(1) Physician. (2) House-Physician. (3) Non-resident Casualty Officer, salary at the rate of £100 per annum.

WINCHESTER: ROYAL HAMPSHIRE COUNTY HOSPITAL.—House-Physician (Male). Salary, £80 per annum.

WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.—House-Surgeon. Salary at the rate of £80 per annum.

ZANZIBAR PUBLIC HEALTH AND MEDICAL DEPARTMENTS.—(1) Assistant Health Officer at Zanzibar. (2) Medical Officer at Pemba. Salary, £350 per annum and bonus of £300 on completion of term of service.

This list of vacancies is compiled from our advertisement columns, where full particulars will be found. To ensure notice in this column advertisements must be received not later than the first post on Wednesday morning.

APPOINTMENTS.

BAILEY, E. C., M.B., District Medical Officer of the Nantwich Union.

BRAMWELL, H., M.D., F.R.C.S.Edin., District Medical Officer of the Frome Union.

BURKE, T. A., L.R.C.P.and S.Irel., Medical Officer for the Donnybrook No. 2 (Irishtown) Dispensary District of the North Dublin Union.

CATFORD, H. R., M.D., Physician to In-patients, Bendigo Hospital, Victoria.

CONNOR, C. J., M.B.Melb., Junior Resident Surgeon at the Geelong Hospital, Victoria.

EGLINGTON, Miss C., M.B., B.S.Lond., Resident Medical Officer of the Eastby Sanatorium of the Bradford Union.

FINCKH, A. E., M.B.Syd., Honorary Bacteriologist to the Women's Hospital, Crown Street, Sydney.

GORDON, V. H., M.B., Ch.B.Edin., Surgeon for Venereal Diseases, Perth Public Hospital, Western Australia.

GIBBS, Charles, F.R.C.S., Surgeon-in-Charge of In-patients at Charing Cross Hospital.

MCKEAN, B., M.B., B.S.Glas., Assistant Medical Officer of the Sheffield Union Hospital.

MACLEOD, M., M.B., Certifying Factory Surgeon for the Milnthorpe District, co. Westmorland.

MILLER, E. S., M.B., Ch.B.Liverp., Assistant Medical Officer to the Walton Workhouse of the West Derby Union.

MOSS, Miss H. I., M.B., B.S.Lond., Resident Assistant Medical Officer of the Eastville Workhouse, etc., of the Bristol Parish.

SHEPERD, R. J., L.R.C.S., L.K.Q.C.P.Irel., District Medical Officer of the Hay Union.

SWEET, E. M., M.B.Syd., Resident Medical Officer, Lady Leamington Hospital, Brisbane, Queensland.

TEICHMANN, O., M.R.C.S., L.R.C.P., District Medical Officer of the Kingsclere Union.

WELSH, R. A., M.B., B.S.Durh., District Medical Officer of the Morpeth Union.

EDINBURGH ROYAL INFIRMARY.—The following appointments have been made:

Resident Surgeon.—R. Campbell Beg, M.A., M.R.C.S.Eng., L.R.C.P.Lond., to Surgical Out-patient Department.

Clinical Assistants.—Francis G. Power, L.R.C.P. and S.Edin., to Dr. R. W. Philip; John L. Annan, M.B., Ch.B., to Dr. F. D. Boyd (Medical Waiting-room).

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 3s. 6d., which sum should be forwarded in Post Office Orders or Stamps with the notice not later than Wednesday morning in order to ensure insertion in the current issue.

BIRTHS.

COOPER.—On May 29th, at Pendeen, Cornwall, the wife of W. Herbert Cooper, M.R.C.S.Eng., L.R.C.P.Lond., of a daughter.

FELL.—On June 4th, at 11, Lexden Road, Colchester, the wife of Dr. A. N. Fell, of a son.

HALL.—May 29th, at Eaton Road, West Derby, Liverpool, the wife of Joseph Percy Hall, M.B., B.S., of a son.

MARRIAGE.

WHEELER—SANDERS.—On May 31st, 1912, at St. Bartholomew the Great, West Smithfield, by Rev. C. W. R. Higham, M.A., uncle of the bride, assisted by Rev. W. F. G. Sandwith, M.A., Rector, Edwin Paul Wheeler, A.R.I.B.A., third son of the late T. R. Wheeler, of Ealing, to Madeline Mary Sanders, eldest daughter of C. Sanders, M.O.H. of West Ham.

DEATHS.

ADAMSON.—On the voyage between Borneo and Singapore, Kilgour Adamson, M.B., C.M.Glas., the beloved husband of Nellie Adamson, and late of Springs, Transvaal. (By cable.)

SCOTT-SMITH.—On May 22nd, at Torr House, Chagford, Devon, Andrew Scott-Smith, M.A., M.B., C.M.Edin., some time of Edinburgh Medical Mission, Damascus, aged 46 years.

PUBLISHERS' ANNOUNCEMENTS.

MESSRS. P. BLAKISTON'S SON AND CO. announce the publication of a work, entitled *Methods for Sugar Analysis and Allied Determinations*, by A. Given, formerly Assistant Chemist, Sugar Laboratory, Bureau of Chemistry, United States Department of Agriculture. The same firm announces the publication of a seventh edition of *Massage and the Original Swedish Movements: Their Application to Various Diseases of the Body, a Manual for Students, Nurses, and Physicians*, by Kurre W. Ostrom, from the Royal University of Upsala, Sweden, with 115 illustrations; a second edition of *Diagnostic Methods, Chemical, Bacteriological, and Microscopical*, by Ralph W. Webster, M.D., Assistant Professor of Pharmacologic Therapeutics, and Instructor in Medicine (Medical Department, University of Chicago). They also announce the publication of a second edition of Hansell and Reber's *The Ocular Muscles*, with three plates and eighty-two other illustrations, octavo.

DIARY FOR THE WEEK.

MONDAY.

ROYAL SOCIETY OF MEDICINE, 4.30 p.m.—Special Meeting of the Fellows of the Society for a Discussion on Syphilis, with special reference to: (*a*) Its Prevalence and Intensity in the Past and at the Present Day; opened by Dr. Norman Moore. (*b*) Its Relation to Public Health, including Congenital Syphilis; opened by Dr. F. W. Mott, F.R.S. (*c*) The Treatment of the Disease: opened by Mr. D'Arcy Power. The discussion will be continued on June 17th and June 24th at 5 p.m.

TUESDAY.

ROYAL SOCIETY OF MEDICINE:
SURGICAL SECTION, 5.30 p.m.—Papers.

WEDNESDAY.

UNITED SERVICES MEDICAL SOCIETY, Royal Army Medical College, Grosvenor Road, S.W., 5 p.m.—Annual General Meeting.

THURSDAY.

OPHTHALMOLOGICAL SOCIETY, 11, Chandos Street, Cavendish Square, London, 8 p.m.—(1) Card Specimens. (2) Papers:—Mr. E. Nettleship: (i) Pedigrees of Colour Blindness showing Unusual Characters; (ii) A Pedigree of Progressive Juvenile Cataract. Mr. C. H. Usher: Pedigree of Colour Blindness. Mr. M. L. Hepburn: Inflammatory and Vascular Diseases of the Choroid.

FRIDAY.

ROYAL SOCIETY OF MEDICINE:
SECTION OF ANAESTHETICS, 5.30 p.m.—Annual General Meeting and Election of Officers.

POST-GRADUATE COURSES AND LECTURES.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton, S.W.—Wednesday, 4 p.m., Demonstration of Cases.

LONDON HOSPITAL MEDICAL COLLEGE, E.—Monday, 4.15 p.m., Diagnostic Value of Sensory Changes in Diseases of the Nervous System.

LONDON SCHOOL OF CLINICAL MEDICINE, Seamen's Hospital, Greenwich.—Daily arrangements: Out-patient Demonstration, 10 a.m.; Medical and Surgical Clinics, 2.15 p.m. and 3.15 p.m. respectively; Operations, 2 p.m. Special Clinics: Ear and Throat, at noon and 4.30 p.m., Monday, and noon, Thursday; Skin, at noon and 4 p.m., Tuesday, and noon, Friday. Eye, 11 a.m., Wednesday and Saturday. Radiography, Thursday, 4.30 p.m. Pathological Demonstration, Friday, 11 a.m. Special Lectures: Tuesday, 4.30 p.m., Nervous Basis of Abdominal Pain. Wednesday, 5 p.m., Surgical Demonstration. Thursday, 4.30 p.m., Surface Anatomy. Friday, 2.15 p.m., Abdominal Tumours.

LONDON SCHOOL OF TROPICAL MEDICINE.—Lectures daily (Saturday excepted), at 12 noon and 4 p.m. Practical Laboratory Work daily (Saturday excepted), 10 to 12 a.m. Practical Entomology, 2 to 3.30 p.m. daily; Special Entomology, 10.30 a.m. to 1 p.m. daily. Medical Clinics, Monday and Thursday, at 3 p.m. Operations, Friday, at 3 p.m.

MANCHESTER: ANCOATS HOSPITAL POST-GRADUATE CLINIC.—Thursday, 4.15 p.m., Clinical Demonstration of Medical and Surgical Cases by the Members of the Honorary Staff.

MANCHESTER ROYAL INFIRMARY.—Tuesday, 4 30 p.m., Demonstration of Medical Cases. Friday, 4.30 p.m., Cervical Adenitis in Children.

MEDICAL GRADUATES' COLLEGE AND POLYCLINIC, 22, Chenies Street, W.C.—The following Clinical Demonstrations have been arranged for next week at 4 p.m. each day:—Monday: Skin. Tuesday: Medical. Wednesday: Surgical. Thursday: Surgical. Friday: Eye. Lectures, at 5.15 p.m. each day, will be given as follows:—Monday: Styes. Tuesday: On the Operations for Cancer of the Tongue. Wednesday: Ionic Medication. Thursday: Itching and Itching Diseases of the Skin.

NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC, Queen Square, W.C.—Tuesday, 3.30 p.m., Clinical Cases; Friday, 3.30 p.m., Optic Neuritis.

NORTH-EAST LONDON POST-GRADUATE COLLEGE, Prince of Wales's General Hospital, Tottenham, N.—Monday, Clinics: 10 a.m., Surgical Out-patient; 2.30 p.m., Medical Out-patient, Nose, Throat, and Ear; 3 p.m., Demonstration on Clinical and General Pathology. Tuesday, 2.30 p.m., Operations; Clinics: Surgical, Gynaecological: 3.30 p.m., Medical In-patient; 4.30 p.m., Demonstration of Specimens of Gynaecological Interest. Wednesday, 2 p.m., Throat Operations; 2.30 p.m., Medical Out-patient; Skin and Eye Clinics: X Rays; 3 p.m., Pathological Demonstration; 5.30 p.m., Eye Operations. Thursday, 2.30 p.m., Gynaecological Operations; Clinics: Medical and Surgical Out-patient; 3 p.m., Medical In-patient; 4.30 p.m., Demonstration: The Wassermann Reaction. Friday, 2.30 p.m., Operations; Clinics: Medical Out-patient, Surgical, Eye; 3 p.m., Medical In-patient: Pathological Demonstration.

WEST LONDON POST-GRADUATE COLLEGE, Hammersmith Road, W.—The following are the arrangements for next week: Medical and Surgical Clinics, X Rays, and Operations, 2 p.m. daily. Monday: Gynaecology, 10 a.m.; Pathological Demonstration, 12 noon; Eye, 2 p.m. Tuesday: Gynaecological Operations, 10 a.m.; Demonstration of Minor Operations, 11 a.m.; Throat, Nose, and Ear, 2 p.m.; Skin, 2 p.m. Wednesday: Diseases of Children, 10 a.m.; Throat, Nose, and Ear Operations, 10 a.m.; Eye, 2 p.m.; Gynaecology, 2 p.m. Thursday: Gynaecological Demonstration, 10 a.m.; Lecture, Practical Medicine, 12.15 p.m.; Eye, 2 p.m.; Orthopaedics, 2 p.m. Friday: Gynaecological Operations, 10 a.m.; Lecture, Clinical Pathology, 12.15 p.m.; Throat, Nose, and Ear, 2 p.m.; Skin, 2 p.m. Saturday: Diseases of Children, 10 a.m.; Throat, Nose, and Ear Operations, 10 a.m.; Eye, 10 a.m. Special Lectures at 5 p.m. daily.

DIARY OF THE ASSOCIATION.

Date.		Meetings to be Held.
		JUNE.
8	Sat.	Issue of Voting Papers for Central Council Election from Head Office.
10	Mon.	Central Ethical Committee, 2 p.m.
11	Tues.	Public Health Committee, London, 3.30 p.m.
		South-Eastern Counties Division, St. Boswells, Annual Meeting, 3.15 p.m.
12	Wed.	Medico-Political Committee, London, 2 p.m.
		Fife Branch, Kirkcaldy, Annual Meeting, 3 p.m.
		Inverness-shire, Ross and Cromarty, and Caithness and Sutherland Divisions, Inverness, 3 p.m.
		Forfarshire Division, Annual Meeting.
13	Thur.	City Division, Hackney Town Hall, 4 p.m.
		Hampstead Division, Central Library, Finchley Road, Annual Meeting, 8.15 p.m.
		East York and North Lincolnshire Branch, Grimsby, Annual Meeting.
14	Fri.	Joint Medico-Political and Hospitals Sub-committee, London, 12 noon.
		Hospitals Committee, London, 2 p.m.
		Mid Staffordshire Division, Stafford, Annual Meeting, 2.45 p.m. for 3 p.m.
		Kensington Division, Town Hall, Annual Meeting, 4 p.m.
15	Sat.	Last day for receipt of Voting Papers at Head Office *re* Central Council Election.
		Northern Counties of Scotland Branch, Craigellachie.
17	Mon.	Naval and Military Committee, London (if necessary).
18	Tues.	Organization Committee, London, 2.30 p.m.
19	Wed.	South-Eastern Branch, Town Hall, Bromley, Annual Meeting, 2.15 p.m.; Lunch, 1 p.m.; Dinner, 6.30 p.m.
		Bath and Bristol Branch, Annual Meeting.
		East Anglian Branch, Brentwood, Annual Meeting.
		Lancashire and Cheshire Branch, Bolton, Annual Meeting.
		JUNE (*continued*).
20	Thur.	Metropolitan Counties Branch Council, 4 p.m.
		Newcastle-on-Tyne Division, Newcastle-on-Tyne, 8.30 p.m.
26	Wed.	Finance Committee, London, 2.30 p.m.
		South-Western Branch, Newquay, Annual Meeting, 3 p.m.; Luncheon, 1 p.m.; Dinner, 7 p.m.
27	Thur.	Edinburgh Branch, Edinburgh, Annual Meeting, 4 p.m.
28	Fri.	Birmingham Branch, Medical Institute, Annual Meeting, 3.30 p.m.
		Metropolitan Counties Branch, 429, Strand, W.C., Annual Meeting, 4.30 p.m.
		JULY.
3	Wed.	Central Council, London, 2 p.m.
		Annual Meeting, Liverpool.
19	Fri.	Annual Representative Meeting.
20	Sat.	Annual Representative Meeting.
22	Mon.	Council Meeting, 9.30 a.m.
		Annual Representative Meeting, 10 a.m.
		Secretaries' Conference and Dinner, 7 p.m.
23	Tues.	Annual Representative Meeting, 9.30 a.m.
		Annual General Meeting, 2 p.m., President's Address, 8.30 p.m.
24	Wed.	Council Meeting, 9 a.m.
		Sectional Meetings, 10 a.m. to 1 p.m.
		Address in Medicine, 12.30 p.m.
		Religious Services, 3 p.m.
25	Thur.	Sectional Meetings, 10 a.m. to 1 p.m.
		Address in Surgery, 12.30 p.m.
		Annual Dinner, 7.30 p.m.
26	Fri.	Council Meeting, 9 a.m.
		Sectional Meetings, 10 a.m. to 1 p.m.
27	Sat.	Excursions.

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